

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF NEW YORK

Case number (if known)

Chapter 11

Check if this an amended filing

Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	<u>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</u>		
2. All other names debtor used in the last 8 years	<u>FDBA Schiller &amp; Knapp, LLP</u>		
	Include any assumed names, trade names and doing business as names		
3. Debtor's federal Employer Identification Number (EIN)	<u>14-1809981</u>		
4. Debtor's address	Principal place of business  <u>15 Cornell Road</u> <u>Latham, NY 12110</u>	Mailing address, if different from principal place of business  Number, Street, City, State & ZIP Code	P.O. Box, Number, Street, City, State & ZIP Code
	<u>Albany</u>	Location of principal assets, if different from principal place of business  County	Number, Street, City, State & ZIP Code
5. Debtor's website (URL)	<u><a href="http://www.schillerknapp.com/">http://www.schillerknapp.com/</a></u>		
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____		

Debtor

Schiller, Knapp, Lefkowitz, & Hertzel, LLP

Name

Case number (if known) \_\_\_\_\_

**7. Describe debtor's business**

## A. Check one:

Health Care Business (as defined in 11 U.S.C. § 101(27A))  
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
 Railroad (as defined in 11 U.S.C. § 101(44))  
 Stockbroker (as defined in 11 U.S.C. § 101(53A))  
 Commodity Broker (as defined in 11 U.S.C. § 101(6))  
 Clearing Bank (as defined in 11 U.S.C. § 781(3))  
 None of the above

## B. Check all that apply

Tax-exempt entity (as described in 26 U.S.C. §501)  
 Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)  
 Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.5411**8. Under which chapter of the Bankruptcy Code is the debtor filing?**

## Check one:

Chapter 7  
 Chapter 9  
 Chapter 11. Check all that apply:

The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  
 The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, and it chooses to proceed under Subchapter V of Chapter 11. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  
 A plan is being filed with this petition.  
 Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).  
 The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.  
 The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

Chapter 12

**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?** No. Yes.

If more than 2 cases, attach a separate list.

District \_\_\_\_\_  
District \_\_\_\_\_When \_\_\_\_\_  
When \_\_\_\_\_Case number \_\_\_\_\_  
Case number \_\_\_\_\_

Debtor Schiller, Knapp, Lefkowitz, & Hertzel, LLP \_\_\_\_\_ Case number (if known) \_\_\_\_\_  
 Name \_\_\_\_\_

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**

No  
 Yes.

List all cases. If more than 1, attach a separate list

Debtor _____	Relationship _____
District _____	Case number, if known _____

**11. Why is the case filed in this district?** Check all that apply:

Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.  
 A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**

No

Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention? (Check all that apply.)**

It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.  
 What is the hazard? \_\_\_\_\_  
 It needs to be physically secured or protected from the weather.  
 It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).  
 Other \_\_\_\_\_

**Where is the property?**

Number, Street, City, State & ZIP Code \_\_\_\_\_

**Is the property insured?**

No

Yes. Insurance agency \_\_\_\_\_

Contact name \_\_\_\_\_

Phone \_\_\_\_\_

### Statistical and administrative information

**13. Debtor's estimation of available funds**

Check one:

Funds will be available for distribution to unsecured creditors.  
 After any administrative expenses are paid, no funds will be available to unsecured creditors.

**14. Estimated number of creditors**

1-49  
 50-99  
 100-199  
 200-999

1,000-5,000  
 5,001-10,000  
 10,001-25,000

25,001-50,000  
 50,001-100,000  
 More than 100,000

**15. Estimated Assets**

\$0 - \$50,000  
 \$50,001 - \$100,000  
 \$100,001 - \$500,000  
 \$500,001 - \$1 million

\$1,000,001 - \$10 million  
 \$10,000,001 - \$50 million  
 \$50,000,001 - \$100 million  
 \$100,000,001 - \$500 million

\$500,000,001 - \$1 billion  
 \$1,000,000,001 - \$10 billion  
 \$10,000,000,001 - \$50 billion  
 More than \$50 billion

**16. Estimated liabilities**

\$0 - \$50,000

\$1,000,001 - \$10 million

\$500,000,001 - \$1 billion

Debtor

Schiller, Knapp, Lefkowitz, & Hertzel, LLP

Name

Case number (*if known*) \$50,001 - \$100,000  
 \$100,001 - \$500,000  
 \$500,001 - \$1 million \$10,000,001 - \$50 million  
 \$50,000,001 - \$100 million  
 \$100,000,001 - \$500 million \$1,000,000,001 - \$10 billion  
 \$10,000,000,001 - \$50 billion  
 More than \$50 billion

Debtor

Schiller, Knapp, Lefkowitz, & Hertzel, LLP

Name

Case number (if known)

**Request for Relief, Declaration, and Signatures**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 30, 2023  
MM / DD / YYYY

**X /s/ Gary Lefkowitz**

Signature of authorized representative of debtor

**Gary Lefkowitz**

Printed name

Title Partner

**18. Signature of attorney**

**X /s/ Michael Boyle**

Signature of attorney for debtor

Date **May 30, 2023**

MM / DD / YYYY

**Michael Boyle**

Printed name

**Boyle Legal LLC**

Firm name

**64 2nd Street**

**Troy, NY 12180**

Number, Street, City, State & ZIP Code

Contact phone **518-687-1648**

Email address

**mike@boylebankruptcy.com**

**519211 NY**

Bar number and State

Fill in this information to identify the case:

Debtor name Schiller, Knapp, Lefkowitz, & Hertzel, LLP

United States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORK

Case number (if known) \_\_\_\_\_

Check if this is an amended filing

Official Form 202

## Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

### Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets–Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- Amended Schedule*
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 30, 2023

X /s/ Gary Lefkowitz

Signature of individual signing on behalf of debtor

Gary Lefkowitz

Printed name

Partner

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **Schiller, Knapp, Lefkowitz, & Hertz, LLP**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF NEW YORK**

Case number (if known): \_\_\_\_\_

Check if this is an  
amended filing

## Official Form 204

### Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
a360 Technology Solutions LLC P.O. Box 679278 Dallas, TX 75267		Vendor				\$102,976.47
Accu-Serve, Ltd 88 Froehlich Farm Blvd - Suite 403 Woodbury, NY 11797		Vendor				\$44,023.94
Advantage Foreclosure Services, Inc. 201 Old Country Road - Suite 200 Melville, NY 11747		Vendor				\$132,730.06
Advantage Legal Services, Inc. 201 Old Country Road Melville, NY 11747		Vendor				\$103,257.08
Alstate Process Service, Inc. 60 Burt Drive Deer Park, NY 11729		Vendor				\$346,554.25
DGR Subpoena & Messenger Svc, Inc. 1359 Littleton Rd Morris Plains, NJ 07950-3000		Vendor				\$34,396.41
Fortune Title Agency, Inc. 39 Woodland Road Roseland, NJ 07068		Vendor				\$36,113.50

Debtor Schiller, Knapp, Lefkowitz, & Hertzel, LLP  
Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
<b>Frontier Abstract &amp; Researchers, Inc. 69 Cascade Drive - Suite 101 Rochester, NY 14614</b>		Vendor				<b>\$101,967.96</b>
<b>Hewlett-Packard Financial Services Co 200 Connell Drive - Suite 5000 Berkeley Heights, NJ 07922</b>		Servers (leased)		\$115,293.89	\$0.00	<b>\$115,293.89</b>
<b>IPFS 170 Northpointe Parkway - Suite 300 Buffalo, NY 14228</b>		E&O Insurance				<b>\$75,475.10</b>
<b>M&amp;T Bank -Special Assets Department Mr. Kenneth Paulin, Jr. One Fountain Plaza - 9th Floor Buffalo, NY 14203</b>		Credit Card	Disputed			<b>\$75,000.00</b>
<b>M&amp;T Bank -Special Assets Department Mr. Kenneth Paulin, Jr. One Fountain Plaza - 9th Floor Buffalo, NY 14203</b>		Blanket UCC Lien	Disputed	\$126,000.00	\$0.00	<b>\$126,000.00</b>
<b>M&amp;T Bank -Special Assets Department Mr. Kenneth Paulin, Jr. One Fountain Plaza - 9th Floor Buffalo, NY 14203</b>		Blanket UCC lien	Disputed	\$1,006,000.00	\$0.00	<b>\$1,006,000.00</b>
<b>PNJ Technology Partners, Inc 426 New Karner Road Albany, NY 12205</b>		Vendor				<b>\$50,896.72</b>
<b>ProVest LLC 7702 Woodland Center Blvd - Suite 100 Tampa, FL 33614</b>		Vendor				<b>\$78,470.00</b>

Debtor Schiller, Knapp, Lefkowitz, & Hertzel, LLP  
Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Publication Elite Company, Inc 88 Froehlich Farm Blvd - Suite 403 Woodbury, NY 11797		Vendor				\$129,459.84
Small Business Administration Office of General Counsel 409 Third St., SW Washington, DC 20416				\$148,944.63	\$0.00	\$148,944.63
STOX Posting & Publishing LLC 2701 Transit Road - Suite 139 Elma, NY 14059		Vendor				\$140,213.54
STOX Pro Serve 2701 Transit Road - Suite 140 Elma, NY 14059		Vendor				\$50,047.54
The Data Center 426 New Karner Road Albany, NY 12205		Vendor				\$85,463.05

Fill in this information to identify the case:

Debtor name Schiller, Knapp, Lefkowitz, & Hertzel, LLP

United States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORK

Case number (if known) \_\_\_\_\_

Check if this is an amended filing

**Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets**

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from Schedule A/B..... \$ 0.00

1b. **Total personal property:**

Copy line 91A from Schedule A/B..... \$ 473,500.00

1c. **Total of all property:**

Copy line 92 from Schedule A/B..... \$ 473,500.00

**Part 2: Summary of Liabilities**

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of Schedule D..... \$ 1,401,320.37

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of Schedule E/F..... \$ 72,991.60

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F..... +\$ 1,929,538.94

4. **Total liabilities** .....

Lines 2 + 3a + 3b

\$ 3,403,850.91

Fill in this information to identify the case:

Debtor name Schiller, Knapp, Lefkowitz, & Hertz, LLP

United States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORK

Case number (if known) \_\_\_\_\_

Check if this is an amended filing

## Official Form 206A/B

### Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

No. Go to Part 2.

Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. Checking, savings, money market, or financial brokerage accounts (*Identify all*)

Name of institution (bank or brokerage firm) Type of account

Last 4 digits of account number

3.1. <u>KeyBank</u>	<u>Checking</u>	<u>0240</u>	<u>\$0.00</u>
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3.2. <u>KeyBank</u>	<u>Checking</u>	<u>1149</u>	<u>\$0.00</u>
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3.3. <u>KeyBank - NY trust account. Debtor has no monetary interest</u>	<u>IOLA</u>	<u>3870</u>	<u>\$0.00</u>
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3.4. <u>KeyBank - PA trust account. Debtor has no monetary interest</u>	<u>IOLA</u>	<u>1016</u>	<u>\$0.00</u>
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3.5. <u>KeyBank - VT trust account. Debtor has no monetary interest.</u>	<u>IOLA</u>	<u>1184</u>	<u>\$0.00</u>
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3.6. <u>KeyBank</u>	<u>Checking</u>	<u>2053</u>	<u>\$0.00</u>
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Debtor Schiller, Knapp, Lefkowitz, & Hertzel, LLP \_\_\_\_\_ Case number (*If known*) \_\_\_\_\_  
Name \_\_\_\_\_

3.7.	<u>KeyBank</u>	<u>Checking</u>	<u>4522</u>	<u>\$0.00</u>
3.8.	<u>KeyBank</u>	<u>Checking</u>	<u>1024</u>	<u>\$0.00</u>
3.9.	<u>KeyBank</u>	<u>Checking</u>	<u>0864</u>	<u>\$0.00</u>
3.10	<u>KeyBank</u>	<u>Money Market</u>	<u>9223</u>	<u>\$0.00</u>
3.11	<u>KeyBank</u>	<u>Checking</u>	<u>8320</u>	<u>\$0.00</u>
3.12	<u>M&amp;T - REO account.</u>	<u>Checking</u>	<u>5388</u>	<u>\$0.00</u>
3.13	<u>M&amp;T</u>	<u>Checking</u>	<u>5469</u>	<u>\$0.00</u>
3.14	<u>M&amp;T. NJ trust account. Debtor has no monetary interest</u>	<u>Checking</u>	<u>0661</u>	<u>\$0.00</u>
3.15	<u>M&amp;T. NJ trust account. Debtor has no monetary interest</u>	<u>Checking</u>	<u>5025</u>	<u>\$0.00</u>
3.16	<u>M&amp;T</u>	<u>Checking</u>	<u>0646</u>	<u>\$0.00</u>
3.17	<u>M&amp;T</u>	<u>Savings</u>	<u>8582</u>	<u>\$0.00</u>
3.18	<u>M&amp;T</u>	<u>Checking</u>	<u>5592</u>	<u>\$0.00</u>
3.19	<u>Saratoga Bank. NY trust account. Debtor has no monetary interest</u>	<u>Checking</u>	<u>1433</u>	<u>\$0.00</u>

4. Other cash equivalents (*Identify all*)

Debtor Schiller, Knapp, Lefkowitz, & Hertzel, LLP  
Name \_\_\_\_\_

Case number (*If known*) \_\_\_\_\_

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$0.00**

**Part 2: Deposits and Prepayments**

6. Does the debtor have any deposits or prepayments?

No. Go to Part 3.

Yes Fill in the information below.

**Part 3: Accounts receivable**

10. Does the debtor have any accounts receivable?

No. Go to Part 4.

Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less:	<b>327,500.00</b>	-	<b>0.00</b>	= ....	<b>\$327,500.00</b>
	face amount		doubtful or uncollectible accounts		

11b. Over 90 days old:	<b>96,000.00</b>	-	<b>0.00</b>	= ....	<b>\$96,000.00</b>
	face amount		doubtful or uncollectible accounts		

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

**\$423,500.00**

**Part 4: Investments**

13. Does the debtor own any investments?

No. Go to Part 5.

Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

No. Go to Part 6.

Yes Fill in the information below.

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

No. Go to Part 7.

Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

No. Go to Part 8.

Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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Debtor	<u>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</u> Name	Case number ( <i>If known</i> )
39.	<b>Office furniture</b> <u>Office furniture and fixtures.</u>	<u>\$1,600,000.00</u> <u>Liquidation</u> <u>\$50,000.00</u>
40.	<b>Office fixtures</b>	
41.	<b>Office equipment, including all computer equipment and communication systems equipment and software</b> <u>Servers (leased)</u>	<u>\$0.00</u> <u>\$0.00</u>
	<b>Copiers (leased)</b>	<u>\$0.00</u> <u>\$0.00</u>

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.** \$50,000.00  
Add lines 39 through 42. Copy the total to line 86.

44. Is a depreciation schedule available for any of the property listed in Part 7?  
 No  
 Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?  
 No  
 Yes

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

No. Go to Part 9.  
 Yes Fill in the information below.

**Part 9: Real property**

54. Does the debtor own or lease any real property?

No. Go to Part 10.  
 Yes Fill in the information below.

**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

No. Go to Part 11.  
 Yes Fill in the information below.

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?  
Include all interests in executory contracts and unexpired leases not previously reported on this form.

No. Go to Part 12.  
 Yes Fill in the information below.

Debtor Schiller, Knapp, Lefkowitz, & Hertzel, LLP  
Name \_\_\_\_\_

Case number (*If known*) \_\_\_\_\_

Part 12: **Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$0.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$423,500.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$50,000.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$0.00	
88. Real property. <i>Copy line 56, Part 9.....&gt;</i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$473,500.00	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$473,500.00

**Fill in this information to identify the case:**

Debtor name Schiller, Knapp, Lefkowitz, & Hertz, LLP

United States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORK

Case number (if known) \_\_\_\_\_

Check if this is an amended filing

**Official Form 206D**

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.  
 Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.		Column A Amount of claim	Column B Value of collateral that supports this claim
<b>2.1</b>	<b>Hewlett-Packard Financial Services Co</b> Creditor's Name <b>200 Connell Drive - Suite 5000 Berkeley Heights, NJ 07922</b> Creditor's mailing address	Describe debtor's property that is subject to a lien <b>Servers (leased)</b>	<b>\$115,293.89</b> <b>\$0.00</b>
	Creditor's email address, if known	Describe the lien	
	Date debt was incurred	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <b>7909</b>	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H)	
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
<b>2.2</b>	<b>M&amp;T Bank -Special Assets Department</b> Creditor's Name <b>Mr. Kenneth Paulin, Jr.</b> <b>One Fountain Plaza - 9th Floor</b> <b>Buffalo, NY 14203</b> Creditor's mailing address	Describe debtor's property that is subject to a lien <b>Blanket UCC lien</b>	<b>\$1,006,000.00</b> <b>\$0.00</b>
	Creditor's email address, if known	Describe the lien	
	Date debt was incurred	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
	Last 4 digits of account number <b>0026</b>	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H)	

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
Name		
<b>Do multiple creditors have an interest in the same property?</b>		As of the petition filing date, the claim is:
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.		Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
<b>M&amp;T Bank -Special Assets Department</b> Creditor's Name <b>Mr. Kenneth Paulin, Jr.</b> <b>One Fountain Plaza - 9th Floor</b> <b>Buffalo, NY 14203</b> Creditor's mailing address		Describe debtor's property that is subject to a lien <b>Blanket UCC Lien</b>  Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)
		<b>\$126,000.00</b>
		<b>\$0.00</b>
<b>2.3</b> <b>National Business Leasing</b> Creditor's Name <b>A Program of DeLage Landen Financial Svc</b> <b>1111 Old Eagle School Road</b> <b>Wayne, PA 19087</b> Creditor's mailing address		Describe debtor's property that is subject to a lien <b>Copiers (leased)</b>  Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)
		<b>\$5,081.85</b>
		<b>\$0.00</b>
<b>2.4</b> <b>Small Business Administration</b>		Describe debtor's property that is subject to a lien  Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)
		<b>\$148,944.63</b>
		<b>\$0.00</b>

Debtor Schiller, Knapp, Lefkowitz, & Hertzel, LLP  
Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

Creditor's Name

**Office of General Counsel**  
**409 Third St., SW**  
**Washington, DC 20416**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**UNKN**

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

**UCC Blanket Lien**

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent

Unliquidated

Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$1,401,320.3**

**7**

**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

**Greg Mascitti, Esq.**  
**McCarter & English, LLP**  
**825 Eighth Ave, 31st Floor**  
**New York, NY 10019**

On which line in Part 1 did  
you enter the related creditor?

Last 4 digits of  
account number for  
this entity

Line 2.2

**National Business Leasing**  
**PO Box 41602**  
**Philadelphia, PA 19101-1602**

Line 2.4

Fill in this information to identify the case:

Debtor name Schiller, Knapp, Lefkowitz, & Hertz, LLP

United States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORK

Case number (if known) \_\_\_\_\_

Check if this is an amended filing

## Official Form 206E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.

Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>A. Christine Sano</b> <b>5 Hidey Ave.</b> <b>Wynantskill, NY 12198</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$489.33</b> <b>\$489.33</b>
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.2	Priority creditor's name and mailing address <b>Amanie Akarah-Bailey</b> <b>42 Troy View Lane</b> <b>Buffalo, NY 14221</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,538.47</b> <b>\$1,538.47</b>
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Schiller, Knapp, Lefkowitz, & Hertzel, LLP Name	Case number (if known)		
2.3	Priority creditor's name and mailing address <b>Amy DeAngelus</b> <b>598 Dell Road</b> <b>Landing, NJ 07850</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$2,779.00</b>	<b>\$2,779.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.4	Priority creditor's name and mailing address <b>Ashley Novak</b> <b>1325 Blue Factory Hill Road</b> <b>Cropseyville, NY 12052</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$779.65</b>	<b>\$779.65</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.5	Priority creditor's name and mailing address <b>Barbara Worek</b> <b>6914 Keystone Street</b> <b>Philadelphia, PA 19135</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,120.46</b>	<b>\$1,120.46</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.6	Priority creditor's name and mailing address <b>Brandon Johnson</b> <b>1245 Ridge Avenue - Unit 108</b> <b>Philadelphia, PA 19123</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,004.51</b>	<b>\$1,004.51</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Priority creditor's name and mailing address	Case number (if known)
2.7	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b> Name	
	Priority creditor's name and mailing address <b>Breean VanSolkema</b> <b>5358 Main Street</b> <b>Waitsfield, VT 05673</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.8	Priority creditor's name and mailing address <b>Brittney Wilkinson</b> <b>11277 Southwest Lyra Drive</b> <b>Port Saint Lucie, FL 34987</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.9	Priority creditor's name and mailing address <b>Carolyn Matthei</b> <b>901 Park Avenue - Apt 5</b> <b>Albany, NY 12208</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.10	Priority creditor's name and mailing address <b>Connie Spross</b> <b>4823 Comly Street</b> <b>Philadelphia, PA 19135</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Priority creditor's name and mailing address <b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)	
2.11	Priority creditor's name and mailing address <b>Daniel Young, Esq.</b> <b>38 Nelson Farm Road</b> <b>Moretown, VT 05660</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<b>\$16,364.00</b> <b>\$15,150.00</b>
2.12	Priority creditor's name and mailing address <b>Elliot Smeltzer</b> <b>61 Johnson Rd.</b> <b>Latham, NY 12110</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<b>\$1,200.00</b> <b>\$1,200.00</b>
2.13	Priority creditor's name and mailing address <b>Erin Mesmer</b> <b>2746 Love Road</b> <b>Grand Island, NY 14072</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<b>\$836.31</b> <b>\$836.31</b>
2.14	Priority creditor's name and mailing address <b>Gary Lefkowitz, Esq.</b> <b>25 Linden Ct,</b> <b>Clifton Park, NY 12065</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<b>\$18,862.85</b> <b>\$15,150.00</b>

Debtor	Priority creditor's name and mailing address <b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b> Name	Case number (if known)		
2.15	Priority creditor's name and mailing address <b>Internal Revenue Service</b> <b>Centralized Insolvency Operation</b> <b>PO Box 7346</b> <b>Philadelphia, PA 19101-7346</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Date or dates debt was incurred  Last 4 digits of account number <b>n/a</b> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<b>\$0.00</b>	<b>\$0.00</b>
2.16	Priority creditor's name and mailing address <b>Jennifer Spretty</b> <b>15 Bluebird Ct.</b> <b>Waterford, NY 12188</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<b>\$1,387.71</b>	<b>\$1,387.71</b>
2.17	Priority creditor's name and mailing address <b>Jennifer Yetman</b> <b>4028A Door Stone Drive</b> <b>Latham, NY 12110</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<b>\$850.50</b>	<b>\$850.50</b>
2.18	Priority creditor's name and mailing address <b>Kassandra Pangallo</b> <b>123 1st Ave</b> <b>Mechanicville, NY 12118</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<b>\$718.29</b>	<b>\$718.29</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)		
	Name			
2.19	Priority creditor's name and mailing address <b>Katherine Sticer</b> <b>15825 State Route 22</b> <b>Stephentown, NY 12168</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$931.87</b>	<b>\$931.87</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.20	Priority creditor's name and mailing address <b>Kathryn Legg</b> <b>89 South Allen Street</b> <b>Albany, NY 12208</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$628.89</b>	<b>\$628.89</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.21	Priority creditor's name and mailing address <b>Kathy McCullough Day</b> <b>21 David Avenue</b> <b>Troy, NY 12180</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,682.69</b>	<b>\$0.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.22	Priority creditor's name and mailing address <b>Katie Graff</b> <b>209 Bates Rd.</b> <b>Medina, NY 14103</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,250.00</b>	<b>\$1,250.00</b>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
2.23	<p>Priority creditor's name and mailing address  <b>Kelly Borello</b>  <b>8100 W. Highway 98 - Apt 410</b>  <b>Pensacola, FL 32506</b></p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.24	<p>Priority creditor's name and mailing address  <b>Laura Guzior</b>  <b>22 Hoffman Drive</b>  <b>Latham, NY 12110</b></p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.25	<p>Priority creditor's name and mailing address  <b>Lauren Farrelly</b>  <b>5 Lindberg Drive</b>  <b>Latham, NY 12110</b></p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.26	<p>Priority creditor's name and mailing address  <b>Leonard DePasquale</b>  <b>1150 Millington Road</b>  <b>Schenectady, NY 12309</b></p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Priority creditor's name and mailing address	Case number (if known)
2.27	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b> Name	
	Priority creditor's name and mailing address <b>Linda Overby</b> <b>79 Bridgewood Lane</b> <b>Watervliet, NY 12189</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>\$1,268.61      \$1,268.61</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.28	Priority creditor's name and mailing address <b>Lisa Gadomski</b> <b>58 Whitney Road South</b> <b>Saratoga Springs, NY 12866</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>\$1,562.48      \$1,562.48</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.29	Priority creditor's name and mailing address <b>Nancy Green Montiel</b> <b>81 English Road</b> <b>Round Lake, NY 12151</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>\$208.50      \$208.50</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.30	Priority creditor's name and mailing address <b>New York State Dept. of Tax and Finance</b> <b>Bankruptcy Section</b> <b>PO BOX 5300</b> <b>Albany, NY 12205-0300</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>\$0.00      \$0.00</b>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number <u>n/a</u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
2.31	<p>Priority creditor's name and mailing address  <b>Pamela Agard</b>  <b>30 Park Place</b>  <b>Saratoga Springs, NY 12866</b></p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.32	<p>Priority creditor's name and mailing address  <b>Patricia Ouellette</b>  <b>6 Merrall Drive</b>  <b>Clifton Park, NY 12065</b></p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.33	<p>Priority creditor's name and mailing address  <b>Richard Gerbino</b>  <b>50 Mulberry Lane</b>  <b>Colts Neck, NJ 07722</b></p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.34	<p>Priority creditor's name and mailing address  <b>Samantha Batcher</b>  <b>2020 Westside Ave</b>  <b>Schenectady, NY 12306</b></p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Priority creditor's name and mailing address <b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)		
2.35	<p>Priority creditor's name and mailing address  <b>Shannon DeFilippo-Cleland</b>  <b>339 Saratoga Rd.</b>  <b>Schenectady, NY 12302</b></p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Date or dates debt was incurred</p> <p>Basis for the claim:</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<b>\$986.85</b>	<b>\$986.85</b>
2.36	<p>Priority creditor's name and mailing address  <b>Shelby Mantica</b>  <b>142 Western Ave</b>  <b>Cohoes, NY 12047</b></p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Date or dates debt was incurred</p> <p>Basis for the claim:</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<b>\$1,334.33</b>	<b>\$1,334.33</b>
2.37	<p>Priority creditor's name and mailing address  <b>Sheree Stewart</b>  <b>1506 Huntridge Drive</b>  <b>Clifton Park, NY 12065</b></p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Date or dates debt was incurred</p> <p>Basis for the claim:</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<b>\$726.53</b>	<b>\$726.53</b>
2.38	<p>Priority creditor's name and mailing address  <b>Thomas Pesano</b>  <b>810 Vermont View Dr.</b>  <b>Watervliet, NY 12189</b></p>	<p>As of the petition filing date, the claim is:  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Date or dates debt was incurred</p> <p>Basis for the claim:</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<b>\$738.16</b>	<b>\$738.16</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
2.39	Priority creditor's name and mailing address <b>Valerie Cesare</b> <b>4 Kyle Drive</b> <b>Clifton Park, NY 12065</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred	Basis for the claim:
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		<b>Amount of claim</b>	
3.1	Nonpriority creditor's name and mailing address <b>1 Oak Advisory</b> <b>2901 West Coast Hwy</b> <b>Newport Beach, CA 92663</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.2	Nonpriority creditor's name and mailing address <b>21st Mortgage Corporation</b> <b>1 Market Street, Suite 100</b> <b>Knoxville, TN 37902</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.3	Nonpriority creditor's name and mailing address <b>360 Legal, Inc.</b> <b>201 Fletcher Avenue - Suite 100</b> <b>Sarasota, FL 34237</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,278.00</b>
3.4	Nonpriority creditor's name and mailing address <b>3N Document Destruction, Inc.</b> <b>P.O. Box 4044</b> <b>Clifton Park, NY 12065</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>278</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.5	Nonpriority creditor's name and mailing address <b>4908 Associates, LLC</b> <b>120 North Main Street</b> <b>New City, NY 10956</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.6	<b>Nonpriority creditor's name and mailing address</b> <b>A.W. Hamel Stair Mfg., Inc.</b> <b>3111 Amsterdam Road</b> <b>Schenectady, NY 12302</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number	<u>n/a</u>
		<b>Basis for the claim:</b> _____
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7	<b>Nonpriority creditor's name and mailing address</b> <b>a360 Technology Solutions LLC</b> <b>P.O. Box 679278</b> <b>Dallas, TX 75267</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number	<u>SCHILLER&amp;K</u>
		<b>Basis for the claim:</b> <u>Vendor</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.8	<b>Nonpriority creditor's name and mailing address</b> <b>AbacusNext HQ</b> <b>P.O. Box 31001-4038</b> <b>Pasadena, CA 91110-4038</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number	<u>9507</u>
		<b>Basis for the claim:</b> <u>Vendor</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.9	<b>Nonpriority creditor's name and mailing address</b> <b>ABC Car Leasing, Inc.</b> <b>950 New Loudon Road</b> <b>Latham, NY 12110</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number	<u>n/a</u>
		<b>Basis for the claim:</b> _____
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10	<b>Nonpriority creditor's name and mailing address</b> <b>ABNB Federal Credit Union</b> <b>830 Greenbrier Circle</b> <b>Chesapeake, VA 23320</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number	<u>n/a</u>
		<b>Basis for the claim:</b> _____
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.11	<b>Nonpriority creditor's name and mailing address</b> <b>Accu-Serve, Ltd</b> <b>88 Froehlich Farm Blvd - Suite 403</b> <b>Woodbury, NY 11797</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number	<u>n/a</u>
		<b>Basis for the claim:</b> <u>Vendor</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.12	<b>Nonpriority creditor's name and mailing address</b> <b>Addison County Sheriff</b> <b>35 Court Street</b> <b>Middlebury, VT 05753</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number	<u>n/a</u>
		<b>Basis for the claim:</b> <u>Vendor</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.13	<b>Nonpriority creditor's name and mailing address</b> <b>ADP LLC</b> <b>P.O. Box 842875</b> <b>Boston, MA 02284-2875</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor - Payroll Services</u>
	Last 4 digits of account number <u>2121</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.14	<b>Nonpriority creditor's name and mailing address</b> <b>Advantage Foreclosure Services, Inc.</b> <b>201 Old Country Road - Suite 200</b> <b>Melville, NY 11747</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.15	<b>Nonpriority creditor's name and mailing address</b> <b>Advantage Legal Services, Inc</b> <b>201 Old Country Road</b> <b>Melville, NY 11747</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.16	<b>Nonpriority creditor's name and mailing address</b> <b>Affinity Consulting Group</b> <b>8200 Bryan Dairy Road - Suite 160</b> <b>Seminole, FL 33777</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.17	<b>Nonpriority creditor's name and mailing address</b> <b>AGCO Finance LLC</b> <b>PO BOX 2000</b> <b>Des Moines, IA 50320</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.18	<b>Nonpriority creditor's name and mailing address</b> <b>AIS InfoSource LP</b> <b>LP 5847 San Felipe Suite 1200</b> <b>Houston, TX 77057</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.19	<b>Nonpriority creditor's name and mailing address</b> <b>AIS Portfolio Services, LP</b> <b>LP 5847 San Felipe, Suite 1200</b> <b>Houston, TX 77057</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)	
	Name		
3.20	<b>Nonpriority creditor's name and mailing address</b> <b>Albany Management, Inc.</b> <b>4 Computer Drive West</b> <b>Albany, NY 12205</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.21	<b>Nonpriority creditor's name and mailing address</b> <b>Aldridge Pite, LLP</b> <b>3575 Piedmont Center, Suite 500</b> <b>Atlanta, GA 30305</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.22	<b>Nonpriority creditor's name and mailing address</b> <b>ALFN c/o Schmersahl Treloar &amp; Co, PC</b> <b>Attn: Mark O'Donnell</b> <b>10805 Sunset Office Drive - Suite 400</b> <b>Saint Louis, MO 63127</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>4114</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,250.00</b>
3.23	<b>Nonpriority creditor's name and mailing address</b> <b>Ally Bank serviced by Ally Servicing LLC</b> <b>PO Box 130424</b> <b>Saint Paul, MN 55113</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.24	<b>Nonpriority creditor's name and mailing address</b> <b>Alstate Process Service, Inc.</b> <b>60 Burt Drive</b> <b>Deer Park, NY 11729</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$346,554.25</b>
3.25	<b>Nonpriority creditor's name and mailing address</b> <b>AltaTech Asset Management</b> <b>139 Fulton Street, Suite 614</b> <b>New York, NY 10038</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.26	<b>Nonpriority creditor's name and mailing address</b> <b>American Airlines Credit Union</b> <b>PO Box 619001, MD2100</b> <b>DFW Airport</b> <b>Dallas, TX 75261</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)	
	Name		
3.27	<b>Nonpriority creditor's name and mailing address</b> <b>American Bank</b> <b>4029 W. Tighman Street</b> <b>Allentown, PA 18104</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.28	<b>Nonpriority creditor's name and mailing address</b> <b>American Battlefield Trust</b> <b>1156 15th Street, N.W. Suite 900</b> <b>Washington, DC 20005</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.29	<b>Nonpriority creditor's name and mailing address</b> <b>American Credit Acceptance LLC</b> <b>961 E Main St,</b> <b>Spartanburg, SC 29302</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.30	<b>Nonpriority creditor's name and mailing address</b> <b>American Honda Finance Corporation</b> <b>3625 West Royal Lane, Suite 200</b> <b>Irving, TX 75063</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.31	<b>Nonpriority creditor's name and mailing address</b> <b>American Loan Servicing</b> <b>1192 E Draper Pkwy</b> <b>Draper, UT 84020</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.32	<b>Nonpriority creditor's name and mailing address</b> <b>American Mortgage Investment Properties;</b> <b>PO BOX 2741</b> <b>Seal Beach, CA 90740</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.33	<b>Nonpriority creditor's name and mailing address</b> <b>AmericanChecked Inc.</b> <b>Dept 0208</b> <b>P.O. Box 120208</b> <b>Dallas, TX 75312-0208</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>8722</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,521.85</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)	
	Name		
3.34	<b>Nonpriority creditor's name and mailing address</b> <b>AmeriCredit Financial Services</b> <b>PO Box 18353</b> <b>Arlington, TX 76096</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.35	<b>Nonpriority creditor's name and mailing address</b> <b>AMOS Financial LLC</b> <b>3330 Skokie Valley Road - Suite 301</b> <b>Highland Park, IL 60035</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.36	<b>Nonpriority creditor's name and mailing address</b> <b>Animal Clinic of Hampton Bays</b> <b>238 W. Montauk Hwy</b> <b>Hampton Bays, NY 11946</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.37	<b>Nonpriority creditor's name and mailing address</b> <b>Anthony Signorelli</b> <b>PO BOX 320</b> <b>Schroon Lake, NY 12870</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.38	<b>Nonpriority creditor's name and mailing address</b> <b>Arvest Central Mortgage Company</b> <b>801 John Barrow Road, Suite 1</b> <b>Little Rock, AR 72205</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.39	<b>Nonpriority creditor's name and mailing address</b> <b>Ascendus</b> <b>80 Maiden Lane</b> <b>New York, NY 10038</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.40	<b>Nonpriority creditor's name and mailing address</b> <b>Asset Research Group</b> <b>6011 Knotty Wood Dr</b> <b>Houston, TX 77092</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>UNKN</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$120.00</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.41	<b>Nonpriority creditor's name and mailing address</b> <b>Auction.com, LLC</b> <b>1 Mauchly</b> <b>Irvine, CA 92618</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>UNKN</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.42	<b>Nonpriority creditor's name and mailing address</b> <b>Avidia Bank</b> <b>42 Main Street</b> <b>Hudson, MA 01749</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.43	<b>Nonpriority creditor's name and mailing address</b> <b>B/A Properties, LLC</b> <b>19 British American Blvd.</b> <b>Latham, NY 12110</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Latham, NY - Commercial Lease</u>
	Last 4 digits of account number <u>UNKN</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.44	<b>Nonpriority creditor's name and mailing address</b> <b>Baldwin Sutphen &amp; Frateschi, PLLC</b> <b>126 North Salina Street - Suite 400</b> <b>Syracuse, NY 13202-1050</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.45	<b>Nonpriority creditor's name and mailing address</b> <b>Bank of America, NA</b> <b>PO BOX 2759</b> <b>Jacksonville, FL 32203</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.46	<b>Nonpriority creditor's name and mailing address</b> <b>Bank of Bennington</b> <b>155 North Street</b> <b>Bennington, VT 05201</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.47	<b>Nonpriority creditor's name and mailing address</b> <b>Barrett, Daffin, Frappier, Levine &amp; Bloc</b> <b>780 Johnson Ferry Road, Suite 240</b> <b>Atlanta, GA 30342</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.48	<b>Nonpriority creditor's name and mailing address</b> <b>Bayview Financial</b> <b>4425 Ponce De Leon Blvd, 5th Floor</b> <b>Miami, FL 33146</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.49	<b>Nonpriority creditor's name and mailing address</b> <b>Bell Point Shores Homeowners Association</b> <b>PO BOX 712</b> <b>Bolton Landing, NY 12814</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.50	<b>Nonpriority creditor's name and mailing address</b> <b>Beltway Capital Management, LLC</b> <b>Executive Plaza II</b> <b>Hunt Valley, MD 21031</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.51	<b>Nonpriority creditor's name and mailing address</b> <b>Bennington County Habitat for Humanity</b> <b>P.O. Box 1159</b> <b>Manchester, VT 05254</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.52	<b>Nonpriority creditor's name and mailing address</b> <b>Black Knight Servicing Tech. - BK/FC</b> <b>P.O. Box 849277</b> <b>Los Angeles, CA 90084-9277</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>at-sckn</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.53	<b>Nonpriority creditor's name and mailing address</b> <b>Black Knight Servicing Technologies, LLC</b> <b>P.O. Box 809007</b> <b>Chicago, IL 60680-9007</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>D82</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.54	<b>Nonpriority creditor's name and mailing address</b> <b>Black Knight Svng Technologies, LLC In</b> <b>ATTN: Accounting Department</b> <b>P.O. Box 842651</b> <b>Los Angeles, CA 90084-2651</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>SCHILLER</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.55	<b>Nonpriority creditor's name and mailing address</b> <b>Blue Bridge Financial, LLC</b> <b>535 Washington Street</b> <b>Buffalo, NY 14203</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.56	<b>Nonpriority creditor's name and mailing address</b> <b>Brian Rayment</b> <b>7666 E. 61st Street, Ste. 550</b> <b>Tulsa, OK 74133</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.57	<b>Nonpriority creditor's name and mailing address</b> <b>Brown &amp; Connelly</b> <b>360 Haddon Ave.</b> <b>Collingswood, NJ 08108</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.58	<b>Nonpriority creditor's name and mailing address</b> <b>BSI Financial Services</b> <b>7500 Old Georgetown Road, Suite 1350</b> <b>Bethesda, MD 20814</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.59	<b>Nonpriority creditor's name and mailing address</b> <b>BST &amp; Co., CPA's, LLP</b> <b>10 British American Blvd</b> <b>Latham, NY 12110</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>6027</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.60	<b>Nonpriority creditor's name and mailing address</b> <b>Buckley King</b> <b>1400 Fifth Third Center</b> <b>Cleveland, OH 44114</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.61	<b>Nonpriority creditor's name and mailing address</b> <b>Buckley Madole, P.C.</b> <b>14841 Dallas Parkway, Suite 300</b> <b>Dallas, TX 75254</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b> Name	Case number (if known)	
3.62	<b>Nonpriority creditor's name and mailing address</b> <b>C&amp;C Lending</b> <b>1844 Darrow Road</b> <b>Duanesburg, NY 12056</b>  <b>Date(s) debt was incurred</b> __  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> __  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.63	<b>Nonpriority creditor's name and mailing address</b> <b>Calendar Call LLC</b> <b>108 Roxbury Drive</b> <b>Commack, NY 11725</b>  <b>Date(s) debt was incurred</b> __  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,875.00</b>
3.64	<b>Nonpriority creditor's name and mailing address</b> <b>Caliber Home Loans</b> <b>3701 Regent Blvd</b> <b>Irving, TX 75063</b>  <b>Date(s) debt was incurred</b> __  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> __  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.65	<b>Nonpriority creditor's name and mailing address</b> <b>Cap Com FCU</b> <b>4 Winners Circle</b> <b>Albany, NY 12205</b>  <b>Date(s) debt was incurred</b> __  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> __  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.66	<b>Nonpriority creditor's name and mailing address</b> <b>Capital Affordable Housing Funding Corp</b> <b>255 Orange Street</b> <b>Albany, NY 12210</b>  <b>Date(s) debt was incurred</b> __  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> __  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.67	<b>Nonpriority creditor's name and mailing address</b> <b>Capital Bank/Chemung Canal Trust Company</b> <b>1 Chemung Canal Plaza</b> <b>Elmira, NY 14901</b>  <b>Date(s) debt was incurred</b> __  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> __  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.68	<b>Nonpriority creditor's name and mailing address</b> <b>Capital District Records Management Inc</b> <b>PO Box 4044</b> <b>Clifton Park, NY 12065</b>  <b>Date(s) debt was incurred</b> __  <b>Last 4 digits of account number</b> <u>278</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$252.93</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)	
	Name		
3.69	<b>Nonpriority creditor's name and mailing address</b> <b>Carnow Acceptance Corporation</b> <b>2017 Central Ave.</b> <b>Albany, NY 12205</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.70	<b>Nonpriority creditor's name and mailing address</b> <b>Carrington Mortgage Services, LLC</b> <b>1600 South Douglass Road, Suite 200</b> <b>Anaheim, CA 92806</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.71	<b>Nonpriority creditor's name and mailing address</b> <b>Carter Federal Credit Union</b> <b>100 West Church Street</b> <b>Springhill, LA 71075</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.72	<b>Nonpriority creditor's name and mailing address</b> <b>Casella Waste Mgt, Inc</b>  <b>Williston, VT 05495-1372</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>1707</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$126.18</b>
3.73	<b>Nonpriority creditor's name and mailing address</b> <b>Catherine Bradwell</b> <b>2 Bergen Woods Drive</b> <b>Cohoes, NY 12047</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.74	<b>Nonpriority creditor's name and mailing address</b> <b>Catholic &amp; Community Credit Union</b> <b>6100 West Main Street</b> <b>Belleville, IL 62223</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.75	<b>Nonpriority creditor's name and mailing address</b> <b>Cenlar</b> <b>425 Phillips Blvd</b> <b>Trenton, NJ 08618</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.76	<b>Nonpriority creditor's name and mailing address</b> <b>CFAM Financial Services, LLC</b> <b>PO BOX 601329</b> <b>Dallas, TX 75360</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.77	<b>Nonpriority creditor's name and mailing address</b> <b>Chambles Math Carr PC</b> <b>5720 Carmichael Road</b> <b>Montgomery, AL 36117</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.78	<b>Nonpriority creditor's name and mailing address</b> <b>Champion Mortgage</b> <b>11 Eves Dr</b> <b>Marlton, NJ 08053</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.79	<b>Nonpriority creditor's name and mailing address</b> <b>Chittenden County Sheriff</b> <b>70 Ethan Allen Drive,</b> <b>South Burlington, VT 05403</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.80	<b>Nonpriority creditor's name and mailing address</b> <b>Chrono Solutions, LLC</b> <b>1199 S. Belt Line Road</b> <b>Coppell, TX 75019</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.81	<b>Nonpriority creditor's name and mailing address</b> <b>Circle Management Group, LLC</b> <b>P.O. Box 5091</b> <b>High Point, NC 27262</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>1918</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.82	<b>Nonpriority creditor's name and mailing address</b> <b>City of Johnstown</b> <b>33-41 East Main Street</b> <b>PO BOX 160</b> <b>Johnstown, NY 12095</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)	
	Name		
3.83	<b>Nonpriority creditor's name and mailing address</b> <b>CLAIR &amp; GJERTSEN</b> <b>4 New King Street</b> <b>West Harrison, NY 10604</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.84	<b>Nonpriority creditor's name and mailing address</b> <b>ClearSpring Loan Services, Inc.</b> <b>5220 Tennyson Parkway Suite 200,</b> <b>Plano, TX 75024</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.85	<b>Nonpriority creditor's name and mailing address</b> <b>CM Asset Management LLC</b> <b>PO Box 592</b> <b>Berthoud, CO 80513</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.86	<b>Nonpriority creditor's name and mailing address</b> <b>Cohn &amp; Roth</b> <b>100 East Old Country Road</b> <b>Mineola, NY 11501</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.87	<b>Nonpriority creditor's name and mailing address</b> <b>Colonial Savings</b> <b>2626 B West Freeway</b> <b>Fort Worth, TX 76102</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.88	<b>Nonpriority creditor's name and mailing address</b> <b>Community Loan Servicing, LLC</b> <b>4425 Ponce De Leon Blvd, 5th Floor</b> <b>Miami, FL 33146</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.89	<b>Nonpriority creditor's name and mailing address</b> <b>Condor Capital Corp.</b> <b>165 Oser Ave</b> <b>Hauppauge, NY 11788-8827</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.90	Nonpriority creditor's name and mailing address <b>Cooksey, Toolen, Gage, Duffy &amp; Woog</b> 535 Anton Blvd., 10th Floor Costa Mesa, CA 92626	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.91	Nonpriority creditor's name and mailing address <b>Costello, Cooney &amp; Fearon, PLLC</b> 5701 West Genesee Street Camillus, NY 13031	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.92	Nonpriority creditor's name and mailing address <b>Court Solutions LLC</b> 641 Lexington Avenue - Suite 1920 New York, NY 10022	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.93	Nonpriority creditor's name and mailing address <b>CourtDrive</b> 4500 Park Granada Blvd - Suite 202 Calabasas, CA 91302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.94	Nonpriority creditor's name and mailing address <b>Covius Settlement Services, LLC</b> 720 South Colorado Blvd - Suite 210 P.O. Box 469089 Denver, CO 80246	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.95	Nonpriority creditor's name and mailing address <b>Credit Union of Georgia</b> 69 South Ave. Marietta, GA 30060	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.96	Nonpriority creditor's name and mailing address <b>CTF Asset Management, LLC</b> 117 Wrangler Drive Coppell, TX 75019	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.97	<b>Nonpriority creditor's name and mailing address</b> <b>Dan Lombardi</b> <b>187 Wolf Road</b> <b>Albany, NY 12205</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.98	<b>Nonpriority creditor's name and mailing address</b> <b>Dannemora Federal Credit Union</b> <b>344 Tom Miller Road</b> <b>Plattsburgh, NY 12901</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.99	<b>Nonpriority creditor's name and mailing address</b> <b>Davidson Fink LLP</b> <b>400 Meridian Centre Blvd suite 200,</b> <b>Rochester, NY 14618</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.100	<b>Nonpriority creditor's name and mailing address</b> <b>Dawson &amp; Albritton, P.A.</b> <b>204 E. Arlington Blvd</b> <b>Greenville, NC 27835</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.101	<b>Nonpriority creditor's name and mailing address</b> <b>De Lage Landen</b> <b>8001 Birchwood Court</b> <b>Johnston, IA 50131</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.102	<b>Nonpriority creditor's name and mailing address</b> <b>Deily &amp; Schaefer, Esqs.</b> <b>One Bridge Street</b> <b>PO Box 489</b> <b>Catskill, NY 12414</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.103	<b>Nonpriority creditor's name and mailing address</b> <b>Delano, Jeffrey &amp; Delano, Pamela A.</b> <b>600 Charlton Rd.</b> <b>Ballston Spa, NY 12020</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.104	<b>Nonpriority creditor's name and mailing address</b> <b>Delta Community Credit Union</b> <b>Sibcy Cline Florence Office</b> <b>4885 Houston Rd building suite 102</b> <b>Florence, KY 41042</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.105	<b>Nonpriority creditor's name and mailing address</b> <b>Den Adelsman Klub, Inc.</b> <b>305 East 4th Street</b> <b>Jamestown, NY 14702</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.106	<b>Nonpriority creditor's name and mailing address</b> <b>DGR Subpoena &amp; Messenger Svc, Inc.</b> <b>1359 Littleton Rd</b> <b>Morris Plains, NJ 07950-3000</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>CH50</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.107	<b>Nonpriority creditor's name and mailing address</b> <b>DLM Conesus Lake Associates, LLC.</b> <b>60 Waltham Ave</b> <b>Lancaster, NY 14086</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.108	<b>Nonpriority creditor's name and mailing address</b> <b>Dovenmuehle Mortgage, Inc.</b> <b>1 Corporate Drive, Suite 360</b> <b>Lake Zurich, IL 60047</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.109	<b>Nonpriority creditor's name and mailing address</b> <b>DTF Asset Management, LLC</b> <b>117 Wrangler Drive</b> <b>Irving, TX 75016</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.110	<b>Nonpriority creditor's name and mailing address</b> <b>E-Law, LLC</b> <b>219 South Street, Suite 102</b> <b>New Providence, NJ 07974</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>6724</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<u>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</u>	Name	Case number (if known)
3.111	Nonpriority creditor's name and mailing address <b>Earle &amp; Freeman PLC</b> 107 State Street - 3rd Floor P.O. Box 1385 Montpelier, VT 05601-1385	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> <u>Vendor</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.112	Nonpriority creditor's name and mailing address <b>East Coast Funding Group, Inc</b> 277 Northern Blvd Great Neck, NY 11021	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.113	Nonpriority creditor's name and mailing address <b>EasySoft Legal Software</b> Three 2nd Street - Suite 501 Jersey City, NJ 07302	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$138.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> <u>Vendor</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.114	Nonpriority creditor's name and mailing address <b>Edwards Mental Health</b> 7 Corporate Drive Clifton Park, NY 12065	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.115	Nonpriority creditor's name and mailing address <b>Egress Software Technologies Inc</b> One Marina Park Drive - Suite 1410 Boston, MA 02210	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>UNKN</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> <u>Vendor</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.116	Nonpriority creditor's name and mailing address <b>Eleanor Pers</b> 12 Timberland Drive Albany, NY 12211	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.117	Nonpriority creditor's name and mailing address <b>Emberly-Rayn Boncie</b> 1011 Cheyenne Rd Schenectady, NY 12302	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		<b>Basis for the claim:</b> _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)	
	Name		
3.118	<b>Nonpriority creditor's name and mailing address</b> <b>Entec Consultants, Inc.</b> <b>1200 New Loudon Road</b> <b>Cohoes, NY 12047</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.119	<b>Nonpriority creditor's name and mailing address</b> <b>Eric Feldman &amp; Associates, P.C.</b> <b>123 W. Madison Street</b> <b>Chicago, IL 60602</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.120	<b>Nonpriority creditor's name and mailing address</b> <b>Ernstrom &amp; Dreste, LLP</b> <b>925 Clinton Square</b> <b>Rochester, NY 14604</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.121	<b>Nonpriority creditor's name and mailing address</b> <b>Evans Petree, PC</b> <b>1000 Ridgeway Loop Road, Suite 200</b> <b>Memphis, TN 38120</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.122	<b>Nonpriority creditor's name and mailing address</b> <b>Evocative</b> <b>Dept LA 25225</b> <b>Pasadena, CA 91185-5185</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>2596</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,678.21</b>
3.123	<b>Nonpriority creditor's name and mailing address</b> <b>Fannie Mae</b> <b>780 Third Avenue, 9th Floor</b> <b>New York, NY 10017</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.124	<b>Nonpriority creditor's name and mailing address</b> <b>Fay Servicing, LLC</b> <b>440 S. LaSalle, Suite 2000</b> <b>Chicago, IL 60605</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)	
	Name		
3.125	<b>Nonpriority creditor's name and mailing address</b> <b>FCI Lender Services, Inc.</b> <b>P.O. Box 27370</b> <b>Anaheim, CA 92809-0112</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.126	<b>Nonpriority creditor's name and mailing address</b> <b>Federal Express</b> <b>942 South Shady Grove Road</b> <b>Memphis, TN 38120</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>7923</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.127	<b>Nonpriority creditor's name and mailing address</b> <b>Federal Home Loan Bank of New York</b> <b>101 Park Avenue</b> <b>New York, NY 10178</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.128	<b>Nonpriority creditor's name and mailing address</b> <b>Fein, Such &amp; Crane, LLP</b> <b>7 Century Drive, Suite, 201</b> <b>Parsippany, NJ 07054</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.129	<b>Nonpriority creditor's name and mailing address</b> <b>Fidelity National Title Insurance Compan</b> <b>80 State St Suite 10</b> <b>Albany, NY 12207</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.130	<b>Nonpriority creditor's name and mailing address</b> <b>Financial Asset Services, Inc.</b> <b>17752 Mitchell N.Suite A</b> <b>Irvine, CA 92614</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.131	<b>Nonpriority creditor's name and mailing address</b> <b>First Integrity Title</b> <b>18201 Von Karman - Suite 330</b> <b>Irvine, CA 92612</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>UNKN</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,799.50</b>

Debtor	<u>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</u>	Name	Case number (if known)
3.132 Nonpriority creditor's name and mailing address <b>First Internet Bank</b> 11201 USA Parkway Fishers, IN 46037		As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.133 Nonpriority creditor's name and mailing address <b>First National Bank of Scotia</b> 201 Mohawk Avenue Schenectady, NY 12302		As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.134 Nonpriority creditor's name and mailing address <b>First New York Federal Credit Union</b> 2 Wall Street Albany, NY 12205		As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.135 Nonpriority creditor's name and mailing address <b>First Niagara Bank, N.A.</b> PO BOX 514 Lockport, NY 14095		As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.136 Nonpriority creditor's name and mailing address <b>Firstar Investors, LLC</b> 25 Dogleg Lane Roslyn Heights, NY 11577		As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.137 Nonpriority creditor's name and mailing address <b>Firstar Motel, LLC</b> 25 Dogleg Lane Roslyn Heights, NY 11577		As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.138 Nonpriority creditor's name and mailing address <b>Firstar West Court, LLC</b> 25 Dogleg Lane Roslyn Heights, NY 11577		As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.139	Nonpriority creditor's name and mailing address <b>Flagship Credit Acceptance, LLC</b> PO BOX 965 Chadds Ford, PA 19317	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.140	Nonpriority creditor's name and mailing address <b>Ford Motor Credit Company LLC</b> PO BOX 6275 Dearborn, MI 48121	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.141	Nonpriority creditor's name and mailing address <b>Fortune Title Agency, Inc.</b> 39 Woodland Road Roseland, NJ 07068	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Vendor</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.142	Nonpriority creditor's name and mailing address <b>Foundations Property Management, LLC</b> 1528 Wharton Street Philadelphia, PA 19146	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.143	Nonpriority creditor's name and mailing address <b>FP Mailing Solutions</b> 140 N. Mitchell Ct - Suite 200 Addison, IL 60101-5629	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Vendor</u>
	Last 4 digits of account number <u>6416</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.144	Nonpriority creditor's name and mailing address <b>Franklin Credit Management Corporation</b> 101 Hudson Street, 25th Floor Jersey City, NJ 07302	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.145	Nonpriority creditor's name and mailing address <b>Freedom Mortgage</b> 10500 Kincaid Drive Fishers, IN 46037	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b> Name	Case number (if known)	
3.146	<b>Nonpriority creditor's name and mailing address</b> <b>Freedom Truck Finance</b> <b>421 W. Third Street</b> <b>Fort Worth, TX 76102</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.147	<b>Nonpriority creditor's name and mailing address</b> <b>Friedman Vartolo LLP</b> <b>85 Broad Street</b> <b>New York, NY 10004</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.148	<b>Nonpriority creditor's name and mailing address</b> <b>Frontier Abstract &amp; Researchers, Inc.</b> <b>69 Cascade Drive - Suite 101</b> <b>Rochester, NY 14614</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$101,967.96</b>
3.149	<b>Nonpriority creditor's name and mailing address</b> <b>Fulton County Treasurer</b> <b>County Office Building</b> <b>223 West Main Street</b> <b>Johnstown, NY 12095</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.150	<b>Nonpriority creditor's name and mailing address</b> <b>Galantis, Pollack, Jacobs &amp; Johnson, S.C.</b> <b>839 N. Jefferson Street, Suite 200</b> <b>Milwaukee, WI 53202</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.151	<b>Nonpriority creditor's name and mailing address</b> <b>Garden State Legal Services Corp.</b> <b>600 Lawrence Road</b> <b>Lawrence Township, NJ 08648</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$29,049.00</b>
3.152	<b>Nonpriority creditor's name and mailing address</b> <b>Gary DiMauro Real Estate, Inc</b> <b>58 Broadway</b> <b>Tivoli, NY 12583</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.153	<b>Nonpriority creditor's name and mailing address</b> <b>Generation Mortgage Company</b> <b>3565 piedmont Road</b> <b>Atlanta, GA 30305</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.154	<b>Nonpriority creditor's name and mailing address</b> <b>Getnick, Livingston, Atkinson &amp; Priore,</b> <b>258 Genesee Street</b> <b>Utica, NY 13502</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.155	<b>Nonpriority creditor's name and mailing address</b> <b>Gillespie Fuels &amp; Propane, Inc</b> <b>5197 Main Street</b> <b>Waitsfield, VT 05673</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number <u>UNKN</u>	<b>Basis for the claim:</b> <u>Utility Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.156	<b>Nonpriority creditor's name and mailing address</b> <b>GITSIT Solutions, LLC</b> <b>333 South Anita Drive, Suite 400</b> <b>Orange, CA 92868</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.157	<b>Nonpriority creditor's name and mailing address</b> <b>Gleichenhaus, Marchese &amp; Weishaar PC</b> <b>930 Convention Tower 43 Court St</b> <b>Buffalo, NY 14202-3100</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number <u>n/a</u>	<b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.158	<b>Nonpriority creditor's name and mailing address</b> <b>Glens Falls National Bank and Trust Comp</b> <b>250 Glen Street</b> <b>Glens Falls, NY 12801</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number <u>n/a</u>	<b>Basis for the claim:</b> <u>_</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.159	<b>Nonpriority creditor's name and mailing address</b> <b>GoAmerica, LLC</b> <b>3115 S. Melrose Drive</b> <b>Carlsbad, CA 92010</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number <u>n/a</u>	<b>Basis for the claim:</b> <u>_</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Name	Case number (if known)
3.160	Nonpriority creditor's name and mailing address <b>Goldberger and Kremer</b> 39 North Pearl Street, Suite 201 Albany, NY 12207	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
	Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.161	Nonpriority creditor's name and mailing address <b>Great Lakes Credit Union</b> PO BOX 1289 Deerfield, IL 60015	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
	Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.162	Nonpriority creditor's name and mailing address <b>Greater Commonwealth Investors Assoc. LP</b> c/o H.L. Libby Corp. 803 Commonwealth Drive Warrendale, PA 15086	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$8,248.76
	Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	Basis for the claim: <u>Commercial Landlord - Pittsburgh</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.163	Nonpriority creditor's name and mailing address <b>Green Lake Homestead Inc</b> 100 Harbor View Dr Port Washington, NY 11050	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
	Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.164	Nonpriority creditor's name and mailing address <b>Green Mountain Power</b> 163 Acorn Lane Colchester, VT 05446	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
	Date(s) debt was incurred _____ Last 4 digits of account number <u>3493</u>	Basis for the claim: <u>Utility</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.165	Nonpriority creditor's name and mailing address <b>Green Planet Servicing, LLC</b> 321 Research Pkwy Meriden, CT 06450	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
	Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.166	Nonpriority creditor's name and mailing address <b>Green River Capital LLC</b> 1670 Old Country Rd Ste 220 Plainview, NY 11803	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
	Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	Basis for the claim: _____	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Name	Case number (if known)
3.167 Nonpriority creditor's name and mailing address <b>Greene County Treasurer</b> 411 Main Street Catskill, NY 12414		As of the petition filing date, the claim is: Check all that apply.	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.168 Nonpriority creditor's name and mailing address <b>Greenspoon Marder LLP</b> Trade Centre South, Suite 700 100 West Cypress Road Fort Lauderdale, FL 33309		As of the petition filing date, the claim is: Check all that apply.	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.169 Nonpriority creditor's name and mailing address <b>Gregory Funding, LLC</b> PO Box 230579 Portland, OR 97281		As of the petition filing date, the claim is: Check all that apply.	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.170 Nonpriority creditor's name and mailing address <b>Greystone Servicing Company LLC</b> 419 Belle Air Lane Warrenton, VA 20186		As of the petition filing date, the claim is: Check all that apply.	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.171 Nonpriority creditor's name and mailing address <b>Guaranty Bank</b> 400 West Brown Deer Road Milwaukee, WI 53209		As of the petition filing date, the claim is: Check all that apply.	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.172 Nonpriority creditor's name and mailing address <b>Guardian</b> PO Box 677458 Dallas, TX 75267-7458		As of the petition filing date, the claim is: Check all that apply.	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: <u>Vendor</u>	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.173 Nonpriority creditor's name and mailing address <b>Habitat for Humanity of Dutchess County,</b> 8 Neptune Road Poughkeepsie, NY 12601		As of the petition filing date, the claim is: Check all that apply.	\$0.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)	
	Name		
3.174	<b>Nonpriority creditor's name and mailing address</b> <b>Hagwood and Tipton PC</b> <b>ATTN: Amy Leslie</b> <b>PO Box 726</b> <b>Paris, TN 38242</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.175	<b>Nonpriority creditor's name and mailing address</b> <b>Hahn Loeser &amp; Parks, LLP</b> <b>200 Public Square # 2800</b> <b>Cleveland, OH 44114</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.176	<b>Nonpriority creditor's name and mailing address</b> <b>Handel &amp; Carlini, LLP</b> <b>62 E Main Street</b> <b>Wappingers Falls, NY 12590</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.177	<b>Nonpriority creditor's name and mailing address</b> <b>Harris Beach, PLLC</b> <b>99 Gamsey Road</b> <b>Pittsford, NY 14534</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.178	<b>Nonpriority creditor's name and mailing address</b> <b>Headlands Asset Management</b> <b>765 Baywood Drive, Suite 340</b> <b>Petaluma, CA 94954</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.179	<b>Nonpriority creditor's name and mailing address</b> <b>Hershiser Capital Finance</b> <b>30699 Russell Ranch Road</b> <b>Thousand Oaks, CA 91362</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.180	<b>Nonpriority creditor's name and mailing address</b> <b>Highmark BSNENY</b> <b>40 Century Hill Drive</b> <b>Latham, NY 12110</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>UNKN</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Health Insurance</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$21,779.83</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.181	Nonpriority creditor's name and mailing address <b>Hill Wallack, LLP</b> <b>240 Cedar Knolls Road</b> <b>Cedar Knolls, NJ 07927</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.182	Nonpriority creditor's name and mailing address <b>Hudson Heritage Federal Credit Union</b> <b>25 Rykowski Lane</b> <b>Middletown, NY 10941</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.183	Nonpriority creditor's name and mailing address <b>Hudson Valley Credit Union</b> <b>137 Boardman Road</b> <b>Poughkeepsie, NY 12603</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.184	Nonpriority creditor's name and mailing address <b>Hyundai Capital America dba Kia Motor Fi</b> <b>10550 Talbert Avenue</b> <b>Fountain Valley, CA 92728-0809</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.185	Nonpriority creditor's name and mailing address <b>i-Evolve</b> <b>501 John James Audubon Parkway - Suite 2</b> <b>Buffalo, NY 14228</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Vendor</u>
	Last 4 digits of account number <u>UNKN</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.186	Nonpriority creditor's name and mailing address <b>Ianniello Anderson, PC</b> <b>8 Airline Drive</b> <b>Albany, NY 12205</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.187	Nonpriority creditor's name and mailing address <b>IMail Tracking, LLC</b> <b>9620 Ridgehaven Court - Suite A</b> <b>San Diego, CA 92123</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$20,474.88</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Vendor</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Name	Case number (if known)
3.188 Nonpriority creditor's name and mailing address <b>Innovate Loan Servicing</b> <b>4704 Mercantile Drive</b> <b>Fort Worth, TX 76137</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.189 Nonpriority creditor's name and mailing address <b>Internet Marketing Ninjas</b> <b>3 Orchard Drive</b> <b>Queensbury, NY 12804</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.190 Nonpriority creditor's name and mailing address <b>IPFS</b> <b>3522 Thomasville Road - Suite 400,</b> <b>Tallahassee, FL 32309</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$10,707.68</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: <u>Cyber Insurance</u>	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.191 Nonpriority creditor's name and mailing address <b>IPFS</b> <b>170 Northpointe Parkway - Suite 300</b> <b>Buffalo, NY 14228</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$75,475.10</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: <u>E&amp;O Insurance</u>	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.192 Nonpriority creditor's name and mailing address <b>J. Ward Holliday &amp; Associates, P.C.</b> <b>5930 Royal Lane, Suite 279</b> <b>Dallas, TX 75230</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.193 Nonpriority creditor's name and mailing address <b>JAYA Properties LLC</b> <b>151 Wentworth Avenue</b> <b>Albertson, NY 11507</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.194 Nonpriority creditor's name and mailing address <b>JDRMDBPP,SM,SKP &amp; JD IRA LLC</b> <b>408 Main Street</b> <b>Boonton, NJ 07005</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b> Name	Case number (if known)	
3.195	<b>Nonpriority creditor's name and mailing address</b> <b>Jefferson Capital Systems, LLC</b> <b>16 McLeland Rd.</b> <b>Saint Cloud, MN 56303</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.196	<b>Nonpriority creditor's name and mailing address</b> <b>Jerome Spitzer</b> <b>Jerome Spitzer</b> <b>New York, NY 10016</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.197	<b>Nonpriority creditor's name and mailing address</b> <b>Joann Cummings</b> <b>5 Sweeney Rd</b> <b>Mechanicville, NY 12118</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.198	<b>Nonpriority creditor's name and mailing address</b> <b>John A. Hamelin</b> <b>160 East Avenue</b> <b>Saratoga Springs, NY 12866</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.199	<b>Nonpriority creditor's name and mailing address</b> <b>John H. Fisher, P.C.</b> <b>278 Wall Street</b> <b>Kingston, NY 12401</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.200	<b>Nonpriority creditor's name and mailing address</b> <b>John Joseph Gable, Esq.</b> <b>17 British American Blvd.</b> <b>Latham, NY 12110</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.201	<b>Nonpriority creditor's name and mailing address</b> <b>JP&amp;R Advertising Agency, Inc.</b> <b>305 Broadway, Suite 200</b> <b>New York, NY 10007</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>UNKN</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,106.95</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b> Name	Case number (if known)	
3.202	<b>Nonpriority creditor's name and mailing address</b> <b>KeyBank National Association</b> <b>127 Public Square</b> <b>Cleveland, OH 44114</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.203	<b>Nonpriority creditor's name and mailing address</b> <b>Keystone Asset Management, Inc.</b> <b>890 Forty Foot Road</b> <b>Lansdale, PA 19446</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.204	<b>Nonpriority creditor's name and mailing address</b> <b>Kirkland Financial LLC</b> <b>3000 Business Park Circle, Suite 500</b> <b>Goodlettsville, TN 37072</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.205	<b>Nonpriority creditor's name and mailing address</b> <b>Knuckles &amp; Komosinski, PC</b> <b>220 White Plains Road, 6th Floor</b> <b>Tarrytown, NY 10591</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.206	<b>Nonpriority creditor's name and mailing address</b> <b>Kozeny, McCubbin &amp; Katz, LLP</b> <b>395 North Service Road, Suite 401</b> <b>Melville, NY 11747</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.207	<b>Nonpriority creditor's name and mailing address</b> <b>Kubota Credit Corporation</b> <b>6300 at One Kubota Way</b> <b>Groveport, OH 43125</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.208	<b>Nonpriority creditor's name and mailing address</b> <b>Lakeview Loan Servicing</b> <b>4425 Ponce de Leon MS 5-251</b> <b>Miami, FL 33146</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b> Name	Case number (if known)	
3.209	Nonpriority creditor's name and mailing address <b>Land Home Financial Services, Inc</b> <b>228 Park Avenue South # 67157</b> <b>New York, NY 10003</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.210	Nonpriority creditor's name and mailing address <b>Law Offices of Gary Holt</b> <b>2356 Moore St.</b> <b>San Diego, CA 92110</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.211	Nonpriority creditor's name and mailing address <b>Law Offices of Jeffrey W. Shub</b> <b>27 Congress Street</b> <b>Salem, MA 01970</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.212	Nonpriority creditor's name and mailing address <b>Lease and Rental Management Corp.</b> <b>45 Haverhill Street</b> <b>ATTN: Mary Hawkins</b> <b>Andover, MA 01810</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.213	Nonpriority creditor's name and mailing address <b>Lease Plan U.S.A., Inc.</b> <b>1165 Sanctuary Parkway</b> <b>Alpharetta, GA 30009</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.214	Nonpriority creditor's name and mailing address <b>Lee &amp; Mason Financial Services, Inc.</b> <b>719 State Route 30</b> <b>Northville, NY 12134</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.215	Nonpriority creditor's name and mailing address <b>Lefkoff, Rubin &amp; Gleason</b> <b>5555 Glenridge Connector NE, Suite 900</b> <b>Atlanta, GA 30342-4762</b>  Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.216	<b>Nonpriority creditor's name and mailing address</b> <b>Lefkoff, Rubin, Gleason, Russo &amp; William</b> <b>5555 Glenridge Connector NE, Suite 900</b> <b>Atlanta, GA 30342</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.217	<b>Nonpriority creditor's name and mailing address</b> <b>Lehrman, Lehrman &amp; Guterman LLP</b> <b>199 Main Street</b> <b>White Plains, NY 10601</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.218	<b>Nonpriority creditor's name and mailing address</b> <b>Lemery Greisler LLC</b> <b>677 Broadway, 8th Floor</b> <b>Albany, NY 12207</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.219	<b>Nonpriority creditor's name and mailing address</b> <b>LenderLive Settlement Services LLC</b> <b>1044 Main Street, Suite 700</b> <b>Kansas City, MO 64105</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.220	<b>Nonpriority creditor's name and mailing address</b> <b>Leopold &amp; Associates, PLLC</b> <b>80 Business Park Drive, Suite 110</b> <b>Armonk, NY 10504</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.221	<b>Nonpriority creditor's name and mailing address</b> <b>Levin &amp; Glasser, P.C.</b> <b>420 Lexington Avenue</b> <b>New York, NY 10170</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.222	<b>Nonpriority creditor's name and mailing address</b> <b>Levine &amp; Block</b> <b>PO Box 422148</b> <b>Atlanta, GA 30342</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.223	Nonpriority creditor's name and mailing address <b>Lincoln Archives Inc.</b> <b>155 Great Arrow Ave</b> <b>Buffalo, NY 14207</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim: Vendor</b>
	Last 4 digits of account number <u>900</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.224	Nonpriority creditor's name and mailing address <b>Lipsey, Morrison, Waller &amp; Lipsey, PC</b> <b>1430 Island Home Avenue</b> <b>Knoxville, TN 37920</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim: _____</b>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.225	Nonpriority creditor's name and mailing address <b>Little Motors</b> <b>363 Central Avenue</b> <b>Albany, NY 12206</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim: _____</b>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.226	Nonpriority creditor's name and mailing address <b>Live Oak Bank</b> <b>1741 Tiburon Drive</b> <b>Wilmington, NC 28403</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim: _____</b>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.227	Nonpriority creditor's name and mailing address <b>Loan Portfolio Servicing</b> <b>6750 Locke Ave.</b> <b>Fort Worth, TX 76116</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim: _____</b>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.228	Nonpriority creditor's name and mailing address <b>LoanCare- A ServiceLink Company</b> <b>3637 Sentara Wat</b> <b>Virginia Beach, VA 23452</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim: _____</b>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.229	Nonpriority creditor's name and mailing address <b>Local 888, UFCW</b> <b>Attn: Michael C. Anderson, Esq.</b> <b>Elmsford, NY 10523-1955</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim: _____</b>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertz, LLP</b>	Case number (if known)	
	Name		
3.230	<b>Nonpriority creditor's name and mailing address</b> <b>M&amp;T Bank -Special Assets Department</b> <b>Mr. Kenneth Paulin, Jr.</b> <b>One Fountain Plaza - 9th Floor</b> <b>Buffalo, NY 14203</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$75,000.00</b>
	Date(s) debt was incurred _____		
	Last 4 digits of account number <u>9263</u>		
3.231	<b>Nonpriority creditor's name and mailing address</b> <b>M. J. Peterson - 200 Audubon, LLC</b> <b>200 John James Audubon Parkway</b> <b>Suite 300</b> <b>Buffalo, NY 14228</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Commercial Landlord - Buffalo</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$16,985.30</b>
	Date(s) debt was incurred _____		
	Last 4 digits of account number <u>n/a</u>		
3.232	<b>Nonpriority creditor's name and mailing address</b> <b>Macey, Wilensky, Kessler &amp; Hennings, LLC</b> <b>303 Peachtree Street NE, Suite 4420</b> <b>Atlanta, GA 30308</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
	Date(s) debt was incurred _____		
	Last 4 digits of account number <u>n/a</u>		
3.233	<b>Nonpriority creditor's name and mailing address</b> <b>Mackie Wolf Zientz &amp; Mann, P.C.</b> <b>124 W. Capitol Ave.</b> <b>Little Rock, AR 72201</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
	Date(s) debt was incurred _____		
	Last 4 digits of account number <u>n/a</u>		
3.234	<b>Nonpriority creditor's name and mailing address</b> <b>Marcia &amp; Jules Patricof</b> <b>PO BOX 427</b> <b>Woodmere, NY 11598</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
	Date(s) debt was incurred _____		
	Last 4 digits of account number <u>n/a</u>		
3.235	<b>Nonpriority creditor's name and mailing address</b> <b>Marilyn Krupnick</b> <b>4 Dyers Court</b> <b>East Setauket, NY 11733</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
	Date(s) debt was incurred _____		
	Last 4 digits of account number <u>n/a</u>		
3.236	<b>Nonpriority creditor's name and mailing address</b> <b>Mariners Companies</b> <b>1303 Avocado Ave Suite 200</b> <b>Newport Beach, CA 92660</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
	Date(s) debt was incurred _____		
	Last 4 digits of account number <u>n/a</u>		

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)	
	Name		
3.237	<b>Nonpriority creditor's name and mailing address</b> <b>Martin, Oliveira &amp; Hamel</b> <b>75 South Church St., Suite 550</b> <b>Pittsfield, MA 01201</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.238	<b>Nonpriority creditor's name and mailing address</b> <b>Marvin and Marvin, PLLC</b> <b>PO BOX 151, 44 West Market Street</b> <b>Rhinebeck, NY 12572</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.239	<b>Nonpriority creditor's name and mailing address</b> <b>McCabe, Weisberg &amp; Conway PC</b> <b>123 South Broad Street Suite 1400</b> <b>Philadelphia, PA 19109</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$250.00</b>
3.240	<b>Nonpriority creditor's name and mailing address</b> <b>McCalla Raymer Leibert Pierce, LLC</b> <b>1544 Old Alabama Road</b> <b>Roswell, GA 30076</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.241	<b>Nonpriority creditor's name and mailing address</b> <b>McCarthy Holthus, LLP</b> <b>108 First Avenue South - Suite 300</b> <b>Seattle, WA 98104</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.242	<b>Nonpriority creditor's name and mailing address</b> <b>McManimon, Scotland &amp; Baumann, LLC</b> <b>75 Livingston Avenue</b> <b>Roseland, NJ 07068</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.243	<b>Nonpriority creditor's name and mailing address</b> <b>McMichael Taylor Gray, LLC.</b> <b>3550 Engineering Dr - Suite 260</b> <b>Norcross, GA 30092</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,261.86</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.244	Nonpriority creditor's name and mailing address <b>Mercedes-Benz Financial Services USA LLC</b> <b>14372 Heritage Pkwy</b> <b>Fort Worth, TX 76177</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: __	
	Date(s) debt was incurred __	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.245	Nonpriority creditor's name and mailing address <b>MetLife</b> <b>P.O. Box 783895</b> <b>Philadelphia, PA 19178-3895</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <b>Payroll Expense - Ongoing</b>	
	Date(s) debt was incurred __	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.246	Nonpriority creditor's name and mailing address <b>Michael A. Alfieri, Esq.</b> <b>30 Freneau Ave # 2A</b> <b>Matawan, NJ 07747</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: __	
	Date(s) debt was incurred __	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.247	Nonpriority creditor's name and mailing address <b>Michael Andrews and Associates LLC</b> <b>POB 3875</b> <b>Southfield, MI 48037-3875</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: __	
	Date(s) debt was incurred __	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.248	Nonpriority creditor's name and mailing address <b>Michael Benson</b> <b>2525 County Route 5</b> <b>New Lebanon, NY 12125</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: __	
	Date(s) debt was incurred __	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.249	Nonpriority creditor's name and mailing address <b>Michael F. Smith</b> <b>12 Timberland Drive</b> <b>Albany, NY 12211</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: __	
	Date(s) debt was incurred __	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.250	Nonpriority creditor's name and mailing address <b>Michael J. Biscone</b> <b>151 Main St</b> <b>Ravena, NY 12143</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: __	
	Date(s) debt was incurred __	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b> Name	Case number (if known)	
3.251	<b>Nonpriority creditor's name and mailing address</b> <b>Mid Florida Financing LLC</b> <b>1200 West Memorial Blvd</b> <b>Lakeland, FL 33815</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.252	<b>Nonpriority creditor's name and mailing address</b> <b>Mid-Hudson Valley Federal Credit Union</b> <b>PO BOX 1429</b> <b>1099 Morton Blvd</b> <b>Kingston, NY 12401</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.253	<b>Nonpriority creditor's name and mailing address</b> <b>MidCountry Bank</b> <b>7825 Washington Avenue South, Ste 120</b> <b>Minneapolis, MN 55439</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.254	<b>Nonpriority creditor's name and mailing address</b> <b>Middlesex County Sheriff</b> <b>701 Livingston Avenue,</b> <b>New Brunswick, NJ 08901</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.255	<b>Nonpriority creditor's name and mailing address</b> <b>Midland Mortgage</b> <b>999 NW Grand Blvd</b> <b>Oklahoma City, OK 73118</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.256	<b>Nonpriority creditor's name and mailing address</b> <b>Millsap &amp; Singer, LLC</b> <b>612 Spirit Drive</b> <b>Chesterfield, MO 63005</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.257	<b>Nonpriority creditor's name and mailing address</b> <b>Monaghan Safar Ducham PLCC</b> <b>156 Battery Street</b> <b>Burlington, VT 05401</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b> Name	Case number (if known)	
3.258	<b>Nonpriority creditor's name and mailing address</b> <b>Monmouth County Sheriff</b> <b>2500 Kozloski Road,</b> <b>Freehold, NJ 07728</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.259	<b>Nonpriority creditor's name and mailing address</b> <b>Mortgage America</b> <b>1425 Grape Street</b> <b>Whitehall, PA 18052</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.260	<b>Nonpriority creditor's name and mailing address</b> <b>Mortgage of America</b> <b>1425 Grape Street</b> <b>Whitehall, PA 18052</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.261	<b>Nonpriority creditor's name and mailing address</b> <b>Naiman Law Group, PC</b> <b>4660 La Jolla Drive, Suite 650</b> <b>San Diego, CA 92122</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.262	<b>Nonpriority creditor's name and mailing address</b> <b>National Bank of Coxsackie</b> <b>3-7 Reed Street</b> <b>PO Box 400</b> <b>Coxsackie, NY 12051</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.263	<b>Nonpriority creditor's name and mailing address</b> <b>National Business Technologies</b> <b>15 Corporate Circle</b> <b>Albany, NY 12203</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>SA03</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$576.43</b>
3.264	<b>Nonpriority creditor's name and mailing address</b> <b>National Grid</b> <b>300 Erie Blvd West,</b> <b>Syracuse, NY 13202-0960</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Utility</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$497.64</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)	
	Name		
3.265	<b>Nonpriority creditor's name and mailing address</b> <b>National Response Corp.</b> <b>19 National Dr.</b> <b>Franklin, MA 02038</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.266	<b>Nonpriority creditor's name and mailing address</b> <b>Nationstar Mortgage, LLC d/b/a Mr. Coope</b> <b>350 Highland Drive</b> <b>Lewisville, TX 75067</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.267	<b>Nonpriority creditor's name and mailing address</b> <b>Nationwide Court Services Inc.</b> <b>761 Koehler Ave. - Suite A</b> <b>Ronkonkoma, NY 11779</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>SCHKNA</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.268	<b>Nonpriority creditor's name and mailing address</b> <b>Nelson Law Group, PLLC</b> <b>761 Koehler Ave. - Suite A</b> <b>Ronkonkoma, NY 11779</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>SCHKNA</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$250.00</b>
3.269	<b>Nonpriority creditor's name and mailing address</b> <b>Nesson, Barry, Esq.</b> <b>700 White Plains Road</b> <b>Scarsdale, NY 10583</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.270	<b>Nonpriority creditor's name and mailing address</b> <b>NetDirector, LLC</b> <b>3450 Buschwood Park Drive - Suite 110</b> <b>Tampa, FL 33618</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>AK01</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$955.00</b>
3.271	<b>Nonpriority creditor's name and mailing address</b> <b>New England Newspapers</b> <b>P.O. Box 1171</b> <b>Pittsfield, MA 01202</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,138.00</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b> Name	Case number (if known)
3.272	<b>Nonpriority creditor's name and mailing address</b> <b>Nicholas Financial, Inc.</b> <b>2454 McMullen Booth Rd., Bldg C</b> <b>Clearwater, FL 33759</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.273	<b>Nonpriority creditor's name and mailing address</b> <b>NLR, Inc.</b> <b>4 Revay Road</b> <b>East Windsor, CT 06088</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.274	<b>Nonpriority creditor's name and mailing address</b> <b>Normandy Corporation</b> <b>46 Prince Street</b> <b>Rochester, NY 14607</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.275	<b>Nonpriority creditor's name and mailing address</b> <b>North Atlantic Capital Fund I, LLC.</b> <b>50 Portland Pier</b> <b>Portland, ME 04101</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.276	<b>Nonpriority creditor's name and mailing address</b> <b>Note Resolutions, LLC</b> <b>1135 Clifton Ave, Suite 204</b> <b>Clifton, NJ 07013</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.277	<b>Nonpriority creditor's name and mailing address</b> <b>Notecraft Capital, LLC</b> <b>1619 51st Street</b> <b>Seattle, WA 98103</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.278	<b>Nonpriority creditor's name and mailing address</b> <b>Numerica Credit Union</b> <b>P.O. Box 4000</b> <b>Veradale, WA 99037</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.279	Nonpriority creditor's name and mailing address <b>Ocean County Sheriff</b> <b>120 Hooper Avenue</b> <b>Toms River, NJ 08753</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.280	Nonpriority creditor's name and mailing address <b>OceanFirst Bank</b> <b>907 Route 8 South</b> <b>Cape May Court House, NJ 08210</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.281	Nonpriority creditor's name and mailing address <b>Ocwen Loan Servicing, LLC</b> <b>4828 Loop Central Drive</b> <b>Houston, TX 77081</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.282	Nonpriority creditor's name and mailing address <b>Old Heritage Realty Services, LLC</b> <b>4 Winners Circle</b> <b>Albany, NY 12205</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.283	Nonpriority creditor's name and mailing address <b>Old Republic National Title Insurance Co</b> <b>1200 Liberty Ridge Drive</b> <b>Wayne, PA 19087</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.284	Nonpriority creditor's name and mailing address <b>OneMain Financial Group, LLC</b> <b>601 NW Second Street</b> <b>Evansville, IN 47708</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.285	Nonpriority creditor's name and mailing address <b>Optimum</b> <b>1111 Stewart Ave,</b> <b>Bethpage, NY 11714-3581</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>UNKN</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.286	Nonpriority creditor's name and mailing address <b>Overt Multimedia, Inc.</b> 435 New Scotland Avenue Albany, NY 12208	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.287	Nonpriority creditor's name and mailing address <b>PAC Abstract &amp; Title Services LLC</b> 36 British American Blvd - Suite 102 Latham, NY 12110	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Vendor</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.288	Nonpriority creditor's name and mailing address <b>PACCAR Financial Corp</b> 777 106th Ave NE Bellevue, WA 98004	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.289	Nonpriority creditor's name and mailing address <b>PACER Service Center</b> P.O. Box 780549 San Antonio, TX 78278	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Vendor</u>
	Last 4 digits of account number <u>5540</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.290	Nonpriority creditor's name and mailing address <b>Padfield &amp; Stout, LLP</b> 421 W. Third Street Fort Worth, TX 76102	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.291	Nonpriority creditor's name and mailing address <b>Padgett Law Group</b> 5501 LBJ Freeway, Suite 925 Dallas, TX 75240	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.292	Nonpriority creditor's name and mailing address <b>Paul B. Knapp, Esq</b> 422 Pinkster Ln Slingerlands, NY 12159	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.293	Nonpriority creditor's name and mailing address <b>PC Law Time Matters LLC</b> 2235 Gateway Access Point - Suite 300 Raleigh, NC 27607	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>1099</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.294	Nonpriority creditor's name and mailing address <b>PDA Corporate Stores Division I, LLC</b> 75-1160563 Dept #161, P.O. Box 1000 Memphis, TN 38148-0161	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.295	Nonpriority creditor's name and mailing address <b>Peet Law Group</b> 55 Patchen Road South South Burlington, VT 05403	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>Schiller Knapp</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.296	Nonpriority creditor's name and mailing address <b>Pellegrino Law PLLC</b> 1617 John F. Kennedy Blvd Suite 1888 Philadelphia, PA 19103	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.297	Nonpriority creditor's name and mailing address <b>PennyMac Loan Services, LLC</b> 6101 Condor Drive Moorpark, CA 93021	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.298	Nonpriority creditor's name and mailing address <b>Peritus Portfolio Services LLC</b> PO BOX 93991 Southlake, TX 76092	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.299	Nonpriority creditor's name and mailing address <b>Perl Land Development Corp</b> 2024 W HENRIETTA RD Rochester, NY 14623	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Name	Case number (if known)
3.300 Nonpriority creditor's name and mailing address <b>PHH Mortgage</b> <b>1 Mortgage Way</b> <b>Mount Laurel, NJ 08054</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.301 Nonpriority creditor's name and mailing address <b>Planet Home Lending, LLC.</b> <b>321 Research Parkway</b> <b>Meriden, CT 06450</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.302 Nonpriority creditor's name and mailing address <b>PNJ Technology Partners, Inc</b> <b>426 New Karner Road</b> <b>Albany, NY 12205</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$50,896.72</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: <u>Vendor</u>	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.303 Nonpriority creditor's name and mailing address <b>Polow &amp; Polow PLLC</b> <b>125 Main Street</b> <b>Hyde Park, VT 05655</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$658.10</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: <u>Vendor</u>	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.304 Nonpriority creditor's name and mailing address <b>Portfolio Recovery Associates, Inc.</b> <b>120 Corporate Boulevard</b> <b>Norfolk, VA 23502</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.305 Nonpriority creditor's name and mailing address <b>Power Play Partners, LLC</b> <b>P.O. Box 484</b> <b>Clarence Center, NY 14032</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$1,420.83</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: <u>Commercial Landlord - Buffalo</u>	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.306 Nonpriority creditor's name and mailing address <b>Poyner Spruill</b> <b>301 S. College Street #2900</b> <b>Charlotte, NC 28202</b>		As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number <u>n/a</u>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Schiller, Knapp, Lefkowitz, & Hertzel, LLP

Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

3.307	Nonpriority creditor's name and mailing address <b>Prenovost, Normandin, Dawe &amp; Rocha</b> 2122 North Broadway, Suite 200 Santa Ana, CA 92706	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.308	Nonpriority creditor's name and mailing address <b>Prestige Financial Services, Inc.</b> PO BOX 26707 Salt Lake City, UT 84126	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.309	Nonpriority creditor's name and mailing address <b>Primary Residential Mortgage, Inc.</b> 1480 N 2200 W Salt Lake City, UT 84116	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.310	Nonpriority creditor's name and mailing address <b>Primo Water/Crystal Rock</b> 200 Eagles Landing Blvd, Lakeland, FL 33810	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Vendor</u>	
	Last 4 digits of account number <u>8472</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.311	Nonpriority creditor's name and mailing address <b>Prober &amp; Raphael, A Law Corporation</b> 20750 Ventura Blvd, Suite 100 Woodland Hills, CA 91364	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.312	Nonpriority creditor's name and mailing address <b>Professional Appearances, Inc.</b> 407 Essex St Millburn, NJ 07041	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Vendor</u>	
	Last 4 digits of account number <u>UNKN</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.313	Nonpriority creditor's name and mailing address <b>Progressive Credit Union</b> 131 West 33rd Street New York, NY 10001	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.314	Nonpriority creditor's name and mailing address <b>ProVest LLC</b> <b>7702 Woodland Center Blvd - Suite 100</b> <b>Tampa, FL 33614</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim: <u>Vendor</u></b>
	Last 4 digits of account number <u>3257,3403,4463</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.315	Nonpriority creditor's name and mailing address <b>Prozzo Auctions</b> <b>RMP Enterprises, Inc,</b> <b>207 North Main Street</b> <b>Rutland, VT 05701</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Last 4 digits of account number <u>n/a</u>	<b>Basis for the claim: <u>Vendor</u></b>
		Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
3.316	Nonpriority creditor's name and mailing address <b>Publication Elite Company, Inc</b> <b>88 Froehlich Farm Blvd - Suite 403</b> <b>Woodbury, NY 11797</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$129,459.84</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Last 4 digits of account number <u>n/a</u>	<b>Basis for the claim: <u>Vendor</u></b>
		Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
3.317	Nonpriority creditor's name and mailing address <b>Pulvers,Pulvers,Thompson &amp; Friedman, LLP</b> <b>950 Third Ave, 11th Floor</b> <b>New York, NY 10022</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$6,550.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Last 4 digits of account number <u>n/a</u>	<b>Basis for the claim: <u>Vendor</u></b>
		Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
3.318	Nonpriority creditor's name and mailing address <b>Puzzle HR</b> <b>4030 West Boy Scout Blvd - suite 325</b> <b>Tampa, FL 33607</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$5,250.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Last 4 digits of account number <u>1636</u>	<b>Basis for the claim: <u>Vendor</u></b>
		Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
3.319	Nonpriority creditor's name and mailing address <b>Quandis, Inc</b> <b>30021 Tomas Ste 200,</b> <b>Rancho Santa Margarita, CA 92688</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$706.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Last 4 digits of account number <u>n/a</u>	<b>Basis for the claim: <u>Vendor</u></b>
		Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
3.320	Nonpriority creditor's name and mailing address <b>RAC title Search, Inc</b> <b>Metro Office Park 7 - Street 1 - Suite 2</b> <b>Guaynabo, PR 00968</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Last 4 digits of account number <u>n/a</u>	<b>Basis for the claim: <u>Vendor</u></b>
		Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Debtor	<u>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</u>	Name	Case number (if known)
3.321	Nonpriority creditor's name and mailing address <b>Radharani Properties LLC</b> 151 Wentworth Avenue Albertson, NY 11507	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: _____		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.322	Nonpriority creditor's name and mailing address <b>Real Time Resolutions, Inc.</b> 1349 Empire Central Drive Dallas, TX 75247-4029	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: _____		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.323	Nonpriority creditor's name and mailing address <b>Reed &amp; Reed Attorneys at Law</b> 101 E Lumsden Road Brandon, FL 33511	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: _____		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.324	Nonpriority creditor's name and mailing address <b>Regional Acceptance Corporation</b> 500 Willowbrook Office Park #575 Fairport, NY 14450	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: _____		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.325	Nonpriority creditor's name and mailing address <b>Renob, LLC c/o The Falcon Group</b> 95 Mount Bethel Road Warren, NJ 07059	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$2,573.58
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Commercial Landlord - NJ</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.326	Nonpriority creditor's name and mailing address <b>Resnet</b> 27442 Portola Parkway, Foothill Ranch, CA 92610	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$130.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>0678</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Vendor</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.327	Nonpriority creditor's name and mailing address <b>Resurgent Capital Services</b> PO BOX 10587 15 South Main Street, Suite 401 Greenville, SC 29601	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: _____		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.328	<b>Nonpriority creditor's name and mailing address</b> <b>Reverse Mortgage Solutions, Inc.</b> <b>14405 Walters Road</b> <b>Houston, TX 77014-1345</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.329	<b>Nonpriority creditor's name and mailing address</b> <b>Rhinebeck Bank</b> <b>2 Jefferson Plaza</b> <b>Poughkeepsie, NY 12601</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.330	<b>Nonpriority creditor's name and mailing address</b> <b>Richard C. Wayne &amp; Associates, P.C.</b> <b>24 Lenox Pointe</b> <b>Atlanta, GA 30324</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.331	<b>Nonpriority creditor's name and mailing address</b> <b>Riehman Shafer &amp; Shaw, LLC</b> <b>7693 Route 281</b> <b>Tully, NY 13159</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.332	<b>Nonpriority creditor's name and mailing address</b> <b>RIS Insulation Supply</b> <b>1177 Commerce Blvd.</b> <b>Midway, FL 32343</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.333	<b>Nonpriority creditor's name and mailing address</b> <b>Rivermark Community Credit Union</b> <b>PO Box 4040</b> <b>Beaverton, OR 97006</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.334	<b>Nonpriority creditor's name and mailing address</b> <b>Robertson, Anschutz &amp; Schneid, PL (RAS)</b> <b>6409 Congress Ave, Suite 100</b> <b>Boca Raton, FL 33487</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Name	Case number (if known)
3.335	Nonpriority creditor's name and mailing address <b>Robinowitz Cohlan Dubow &amp; Doherty LLP</b> 199 Main Street White Plains, NY 10601-3171	As of the petition filing date, the claim is: Check all that apply.	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: _____		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.336	Nonpriority creditor's name and mailing address <b>Rockland Employees Federal Credit Union</b> 170 East Central Avenue, Rte 59 West Spring Valley, NY 10977	As of the petition filing date, the claim is: Check all that apply.	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: _____		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.337	Nonpriority creditor's name and mailing address <b>Rondout Savings Bank</b> ATTN: Sara Morrissey Kingston, NY 12401	As of the petition filing date, the claim is: Check all that apply.	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: _____		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.338	Nonpriority creditor's name and mailing address <b>RoundPoint Mortgage Servicing Corporation</b> 5016 Parkway Plaza Blvd Charlotte, NC 28217	As of the petition filing date, the claim is: Check all that apply.	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: _____		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.339	Nonpriority creditor's name and mailing address <b>Rushmore Loan Management Services LLC</b> 15480 Laguna Canyon Road Irvine, CA 92618	As of the petition filing date, the claim is: Check all that apply.	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: _____		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.340	Nonpriority creditor's name and mailing address <b>Rutland County Sheriff</b> 88 Grove Street Rutland, VT 05701	As of the petition filing date, the claim is: Check all that apply.	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Vendor</u>		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.341	Nonpriority creditor's name and mailing address <b>Ryan Hertzel, Esq.</b> 25 Amity Point Clifton Park, NY 12065	As of the petition filing date, the claim is: Check all that apply.	\$0.00
	Date(s) debt was incurred _____	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>n/a</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Basis for the claim: _____		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<u>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</u>	Case number (if known)
	Name	
3.342	Nonpriority creditor's name and mailing address <b>Sagent M&amp;C, LLC</b> 100 Continental Dr - Suite 500, King of Prussia, PA 19406	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>0497</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.343	Nonpriority creditor's name and mailing address <b>Samuel Kramer, Attorney at Law</b> 10 Pantigo Road East Hampton, NY 11937	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.344	Nonpriority creditor's name and mailing address <b>Sapirstein and Sapirstein</b> 1350 Main Street, 12th Floor Springfield, MA 01103	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.345	Nonpriority creditor's name and mailing address <b>Sarah Delane</b> 8 Spruce Street Clifton Park, NY 12065	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.346	Nonpriority creditor's name and mailing address <b>Saratoga National Bank and Trust Company</b> 171 South Broadway Saratoga Springs, NY 12866	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.347	Nonpriority creditor's name and mailing address <b>Schaap Moving Systems, Inc</b> 6 Brown Road Albany, NY 12205	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>Schiller, Knapp LLP</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.348	Nonpriority creditor's name and mailing address <b>Schoharie County Treasurer</b> PO Box 9 Schoharie, NY 12157	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.349	<b>Nonpriority creditor's name and mailing address</b> <b>School Systems Federal Credit Union</b> <b>325 Washington Avenue Extension</b> <b>Albany, NY 12205</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number	<u>n/a</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.350	<b>Nonpriority creditor's name and mailing address</b> <b>Secured Equity Financial</b> <b>1192 E. Draper Pkwy</b> <b>Farmington, NM 87402</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number	<u>n/a</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.351	<b>Nonpriority creditor's name and mailing address</b> <b>SEFCU</b> <b>700 Patroon Creek Road</b> <b>Albany, NY 12206</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number	<u>n/a</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.352	<b>Nonpriority creditor's name and mailing address</b> <b>Seidman &amp; Pincus, LLC</b> <b>777 Terrace Avenue, Suite 508</b> <b>Hasbrouck Heights, NJ 07604</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number	<u>n/a</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.353	<b>Nonpriority creditor's name and mailing address</b> <b>Select Portfolio Servicing, Inc.</b> <b>3217 S Decker Lake Drive</b> <b>Salt Lake City, UT 84119</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number	<u>n/a</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.354	<b>Nonpriority creditor's name and mailing address</b> <b>Selene Finance</b> <b>8201 Cypress Plaza Drive</b> <b>Jacksonville, FL 32256</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number	<u>n/a</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.355	<b>Nonpriority creditor's name and mailing address</b> <b>Self Reliance Federal Credit Union</b> <b>108 Second Avenue</b> <b>New York, NY 10003</b>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred	
	Last 4 digits of account number	<u>n/a</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.356	Nonpriority creditor's name and mailing address <b>Seneca Mortgage Servicing, LLC</b> 611 Jamison Road Elma, NY 14059	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.357	Nonpriority creditor's name and mailing address <b>ServiceLink, LLC</b> 3220 El Camino Real Irvine, CA 92602	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Vendor</u>
	Last 4 digits of account number <u>4785</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.358	Nonpriority creditor's name and mailing address <b>Seterus Inc.</b> 3039 Cornwallis Road, Building 203 #AA14 Durham, NC 27709	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.359	Nonpriority creditor's name and mailing address <b>Severson &amp; Werson</b> One Embarcadero Center San Francisco, CA 94111	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.360	Nonpriority creditor's name and mailing address <b>Shapiro, Dicaro &amp; Barak, LLC</b> 175 Mile Crossing Boulevard Rochester, NY 14624	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.361	Nonpriority creditor's name and mailing address <b>Shapiro, Pendegast &amp; Hasty</b> 211 Perimeter Center Parkway, NE Atlanta, GA 30346	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.362	Nonpriority creditor's name and mailing address <b>Shellpoint Mortgage Servicing</b> 55 Beattie Place, Suite 100 Greenville, SC 29601	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.363	Nonpriority creditor's name and mailing address <b>Skopos Financial, LLC</b> <b>500 E John Carpenter FWY</b> <b>Irving, TX 75062</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.364	Nonpriority creditor's name and mailing address <b>SN Servicing Corporation</b> <b>323 Fifth Street</b> <b>Eureka, CA 95501</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.365	Nonpriority creditor's name and mailing address <b>Specialized Loan Servicing, LLC</b> <b>6200 S. Quebec Street</b> <b>Englewood, CO 80111</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.366	Nonpriority creditor's name and mailing address <b>Spectrum Business</b> <b>400 Washington Blvd</b> <b>Stamford, CT 06902</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Vendor</u>
	Last 4 digits of account number <u>3203</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.367	Nonpriority creditor's name and mailing address <b>Springleaf Finance, Inc.</b> <b>601 N.W. Second Street</b> <b>Evansville, IN 47708</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.368	Nonpriority creditor's name and mailing address <b>Sprout Mortgage</b> <b>4600 Fuller Drive, Suite 350</b> <b>Irving, TX 75038</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.369	Nonpriority creditor's name and mailing address <b>Statebridge Company, LLC</b> <b>6061 S Willow Drive, Suite 300</b> <b>Englewood, CO 80111</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b> Name	Case number (if known)
3.370	<b>Nonpriority creditor's name and mailing address</b> <b>Stewart Title Guaranty Company</b> <b>200 Fifth Avenue, Suite 301</b> <b>Waltham, MA 02451</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.371	<b>Nonpriority creditor's name and mailing address</b> <b>Stewart, Zlimen &amp; Jungers, LTD</b> <b>2860 Patton Road</b> <b>Saint Paul, MN 55113</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.372	<b>Nonpriority creditor's name and mailing address</b> <b>STK Janitorial Services, Inc</b> <b>126 Stone Quarry Road</b> <b>Clifton Park, NY 12065</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.373	<b>Nonpriority creditor's name and mailing address</b> <b>Stolat Financial LLC</b> <b>744 E. Superior Street</b> <b>Duluth, MN 55802</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.374	<b>Nonpriority creditor's name and mailing address</b> <b>STOX Posting &amp; Publishing LLC</b> <b>2701 Transit Road - Suite 139</b> <b>Elma, NY 14059</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.375	<b>Nonpriority creditor's name and mailing address</b> <b>STOX Pro Serve</b> <b>2701 Transit Road - Suite 140</b> <b>Elma, NY 14059</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.376	<b>Nonpriority creditor's name and mailing address</b> <b>Suffolk County Sheriff</b> <b>200 Suffolk Avenue</b> <b>Yaphank, NY 11980</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b> Name	Case number (if known)	
3.377	<b>Nonpriority creditor's name and mailing address</b> <b>Suncoast Schools Federal Credit Union</b> <b>Mail Code: COL 002</b> <b>Tampa, FL 33680</b> <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.378	<b>Nonpriority creditor's name and mailing address</b> <b>Summark Credit Union</b> <b>1187 Troy Schenectady Road</b> <b>Latham, NY 12110</b> <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.379	<b>Nonpriority creditor's name and mailing address</b> <b>Suntrust Mortgage, Inc.</b> <b>6225 N Croatan Hwy, Suite D</b> <b>Kitty Hawk, NC 27949</b> <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.380	<b>Nonpriority creditor's name and mailing address</b> <b>TD Auto Finance LLC</b> <b>4600 Touchion Road,</b> <b>Building 100, Suite 400</b> <b>Jacksonville, FL 32245</b> <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.381	<b>Nonpriority creditor's name and mailing address</b> <b>TD Bank, N.A.</b> <b>PO Box 551080</b> <b>Jacksonville, FL 32255</b> <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.382	<b>Nonpriority creditor's name and mailing address</b> <b>Teal Becker &amp; Chiaramonte</b> <b>7 Washington Square</b> <b>Albany, NY 12205</b> <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,400.00</b>
3.383	<b>Nonpriority creditor's name and mailing address</b> <b>Telgent IP</b> <b>8156 S Wadsworth Blvd - Suite E354</b> <b>Littleton, CO 80128-9114</b> <b>Date(s) debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>1781</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.384	Nonpriority creditor's name and mailing address <b>Ten Eyck Group</b> <b>1924 Western Avenue</b> <b>Albany, NY 12203</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Insurance Carrier</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.385	Nonpriority creditor's name and mailing address <b>The Adirondack Trust Company</b> <b>473 Broadway</b> <b>Saratoga Springs, NY 12866</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.386	Nonpriority creditor's name and mailing address <b>The Data Center</b> <b>426 New Karner Road</b> <b>Albany, NY 12205</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>SLH</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.387	Nonpriority creditor's name and mailing address <b>The Delaware National Bank of Delhi</b> <b>124 Main Street</b> <b>Delhi, NY 13753</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.388	Nonpriority creditor's name and mailing address <b>The Hartford Financial Services Group</b> <b>One Hartford Plaza</b> <b>Hartford, CT 06155</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Insurance</u>
	Last 4 digits of account number <u>0001</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.389	Nonpriority creditor's name and mailing address <b>The Money Source</b> <b>3138 East Elwood Street</b> <b>Phoenix, AZ 85034</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.390	Nonpriority creditor's name and mailing address <b>The Murray Law Firm</b> <b>10 Maxwell Drive</b> <b>Clifton Park, NY 12065</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b> Name	Case number (if known)	
3.391	Nonpriority creditor's name and mailing address <b>The Newman-Kelton Group, LLC</b> 11 Sunset Dr Latham, NY 12110  Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.392	Nonpriority creditor's name and mailing address <b>The Olsen Law Firm, LLC</b> 118 Conistor St Suite B290 Liberty, MO 64068  Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.393	Nonpriority creditor's name and mailing address <b>The Sundmaker Firm</b> 1027 Ninth Street New Orleans, LA 70115  Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.394	Nonpriority creditor's name and mailing address <b>Thomas Reed</b> 111 Hollow Road Amsterdam, NY 12010  Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.395	Nonpriority creditor's name and mailing address <b>Thomson Reuters</b> 610 Opperman Dr, Saint Paul, MN 55123-1396  Date(s) debt was incurred _____ Last 4 digits of account number <u>9000</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,365.30</b>
3.396	Nonpriority creditor's name and mailing address <b>Three Charms, LLC</b> PO Box 88 Waitsfield, VT 05673  Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Commercial Landlord</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$800.00</b>
3.397	Nonpriority creditor's name and mailing address <b>TitleMax of Delaware, Inc.</b> 3401 Kirkwood Hwy Wilmington, DE 19808  Date(s) debt was incurred _____ Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)	
	Name		
3.398	<b>Nonpriority creditor's name and mailing address</b> <b>TitleMax of Ohio, Inc.</b> <b>4613 Northfield Road</b> <b>Cleveland, OH 44128</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.399	<b>Nonpriority creditor's name and mailing address</b> <b>TJC Process Service, LTD</b> <b>88 Froehlich Farm Blvd - Suite 403</b> <b>Woodbury, NY 11797</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,767.06</b>
3.400	<b>Nonpriority creditor's name and mailing address</b> <b>Tom &amp; Lisa Dougherty</b> <b>116 Willow Street</b> <b>Guilderland, NY 12084</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.401	<b>Nonpriority creditor's name and mailing address</b> <b>Toyota Motor Credit Corporation</b> <b>19001 South Western Avenue</b> <b>Torrance, CA 90509</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.402	<b>Nonpriority creditor's name and mailing address</b> <b>TrailNorth Federal Credit Union</b> <b>1178 NYS RTE 9N</b> <b>Ticonderoga, NY 12883</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.403	<b>Nonpriority creditor's name and mailing address</b> <b>TransAmerica Financial Life Insurance</b> <b>6400 C St. SW</b> <b>Cedar Rapids, IA 52499</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>UNKN</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Employee Benefits Provider</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.404	<b>Nonpriority creditor's name and mailing address</b> <b>Triad Financial Services</b> <b>13901 Sutton Park Dr. S, Suite 300</b> <b>Jacksonville, FL 32224</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.405	Nonpriority creditor's name and mailing address <b>Tronconi Segarra &amp; Associates LLP</b> <b>8321 Main Street,</b> <b>Buffalo, NY 14221</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	<b>Basis for the claim:</b> <u>Vendor</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.406	Nonpriority creditor's name and mailing address <b>Trott Law</b> <b>31440 Northwestern Highway</b> <b>Farmington, MI 48334</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	<b>Basis for the claim:</b> <u> </u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.407	Nonpriority creditor's name and mailing address <b>Troy Sand &amp; Gravel Co., Inc.</b> <b>River Street</b> <b>Mechanicville, NY 12118</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	<b>Basis for the claim:</b> <u> </u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.408	Nonpriority creditor's name and mailing address <b>TruNorthern Federal Credit Union</b> <b>494 East Main Street</b> <b>Malone, NY 12953</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	<b>Basis for the claim:</b> <u> </u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.409	Nonpriority creditor's name and mailing address <b>Tuthill Finance</b> <b>60 Katona Drive, Suite 26</b> <b>Fairfield, CT 06824</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	<b>Basis for the claim:</b> <u> </u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.410	Nonpriority creditor's name and mailing address <b>UFirst Federal Credit Union</b> <b>274 Rugar Street</b> <b>Plattsburgh, NY 12901</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	<b>Basis for the claim:</b> <u> </u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.411	Nonpriority creditor's name and mailing address <b>Ulster County</b> <b>244 Fair Street</b> <b>Kingston, NY 12401-0906</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <b>\$0.00</b>
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	<b>Basis for the claim:</b> <u> </u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.412	Nonpriority creditor's name and mailing address <b>Ulster Savings Bank</b> 180 Schwenk Drive Kingston, NY 12401	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.413	Nonpriority creditor's name and mailing address <b>University Bank</b> 29777 Telegraph Rd Southfield, MI 48034	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.414	Nonpriority creditor's name and mailing address <b>USFN</b> 9001 Airport Freeway - Suite 740 North Richland Hills, TX 76180	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Vendor</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.415	Nonpriority creditor's name and mailing address <b>Valon Mortgage Inc.</b> 3100 West Ray Road, Suite 201 Chandler, AZ 85226	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.416	Nonpriority creditor's name and mailing address <b>Vantage Credit Union</b> 4020 Fee Fee Road Bridgeton, MO 63044	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.417	Nonpriority creditor's name and mailing address <b>Velocity Commercial Capital, LLC</b> 30699 Russell Ranch Rd, Suite 295 Thousand Oaks, CA 91362	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.418	Nonpriority creditor's name and mailing address <b>Verizon Wireless Bankruptcy Administrati</b> 500 Technology Drive, Suite 550 Saint Charles, MO 63304	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Vendor</u>
	Last 4 digits of account number <u>UNKN</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Schiller, Knapp, Lefkowitz, & Hertzel, LLP

Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

3.419	Nonpriority creditor's name and mailing address <b>Village Clerk for Village of Fort Edward</b> 161 Ottawa Street Lake George, NY 12845	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.420	Nonpriority creditor's name and mailing address <b>Waitsfield and Champlain Valley Telecom</b> 3898 Main St Waitsfield, VT 05673	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$191.01</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Vendor</u>	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.421	Nonpriority creditor's name and mailing address <b>Walkill Valley Federal Savings &amp; Loan</b> 23 Wallkill Avenue Wallkill, NY 12589	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.422	Nonpriority creditor's name and mailing address <b>Warner Norcross &amp; Judd LLP</b> 900 Fifth Third Center, 111 Lyon Street Grand Rapids, MI 49503-2487	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.423	Nonpriority creditor's name and mailing address <b>Warren County Sheriff</b> 413 2nd Street #1 Belvidere, NJ 07823	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Vendor</u>	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.424	Nonpriority creditor's name and mailing address <b>Washington County Sheriff</b> 10 Elm Street Montpelier, VT 05602	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: <u>Vendor</u>	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.425	Nonpriority creditor's name and mailing address <b>Washington County Treasurer</b> 383 Broadway Fort Edward, NY 12828	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<b>\$0.00</b>
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b>	Case number (if known)
	Name	
3.426	Nonpriority creditor's name and mailing address <b>WB Mason Co, Inc.</b> 59 Centre St Brockton, MA 02301	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>3821</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.427	Nonpriority creditor's name and mailing address <b>Web Title Agency Corporation</b> 755 Jefferson Road - Suite 300 Rochester, NY 14623	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> <u>Vendor</u>
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.428	Nonpriority creditor's name and mailing address <b>Webster Bank, NA.</b> 200 Executive Blvd SO-245 Southington, CT 06489	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.429	Nonpriority creditor's name and mailing address <b>Webster First Federal Credit Union</b> 271 Greenwood Street Worcester, MA 01607	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.430	Nonpriority creditor's name and mailing address <b>Wells Fargo Auto</b> Bankruptcy Department Priority 13 250 E John Carpenter Fwy Irving, TX 75062	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.431	Nonpriority creditor's name and mailing address <b>Wells Fargo Bank NA</b> 7000 Vista Drive West Des Moines, IA 50266	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.432	Nonpriority creditor's name and mailing address <b>Wells Fargo Dealear Services</b> Priority 13 MAC# N9305-162 Minneapolis, MN 55402	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	<b>Basis for the claim:</b> _____
	Last 4 digits of account number <u>n/a</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Schiller, Knapp, Lefkowitz, & Hertzel, LLP

Case number (if known) \_\_\_\_\_

3.433	<b>Nonpriority creditor's name and mailing address</b> <b>Weltman, Weinberg &amp; Reis Co., L.P.A.</b> <b>175 S Third St., Suite 900</b> <b>Columbus, OH 43215</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.434	<b>Nonpriority creditor's name and mailing address</b> <b>Whalley Computer Associates, Inc.</b> <b>1 Whalley Way</b> <b>Southwick, MA 01077</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>SKLHL</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$21,344.59</b>
3.435	<b>Nonpriority creditor's name and mailing address</b> <b>William Ambrose, Esq</b> <b>181 South Main Street</b> <b>Pearl River, NY 10965</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,800.00</b>
3.436	<b>Nonpriority creditor's name and mailing address</b> <b>William Schiller, Esq.</b> <b>703 Sachem Cir</b> <b>Slingerlands, NY 12159</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.437	<b>Nonpriority creditor's name and mailing address</b> <b>Windham County Sheriff</b> <b>185 Old Ferry Road,</b> <b>Brattleboro, VT 05301</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.438	<b>Nonpriority creditor's name and mailing address</b> <b>Yanci Herboldt, Esq.</b> <b>460 South Main St, #78 North</b> <b>Syracuse, NY 13212</b>  <b>Date(s) debt was incurred</b> _____  <b>Last 4 digits of account number</b> <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$300.00</b>

### Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1 <b>Covius Settlement Services, LLC</b> 1044 Main Street, Suite 700 Kansas City, MO 64105	Line <u>3.94</u>  <input type="checkbox"/> Not listed. Explain _____	—

Debtor	<b>Schiller, Knapp, Lefkowitz, &amp; Hertzel, LLP</b> Name	Case number (if known)
	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?
4.2	<b>Greater Commonwealth Investors Assoc. LP</b> c/o H.L. Libby Corp. P.O. Box 62336-16 Baltimore, MD 21264	Line <u>3.162</u>  <input type="checkbox"/> Not listed. Explain _____
4.3	<b>Jonathan Warner, Esq.</b> Warner & Warner, PLLC 6 Automation Lane, Suite 109 Albany, NY 12205	Line <u>3.386</u>  <input type="checkbox"/> Not listed. Explain _____
4.4	<b>Jonathan Warner, Esq.</b> Warner & Warner, PLLC 6 Automation Lane, Suite 109 Albany, NY 12205	Line <u>3.302</u>  <input type="checkbox"/> Not listed. Explain _____
4.5	<b>KekyBank NA</b> 4224 Ridge Lea Road Buffalo, NY 14226	Line <u>3.202</u>  <input type="checkbox"/> Not listed. Explain _____
4.6	<b>Leigh Hoffman, Esq.</b> Lippes Mathias LLP 54 State Street, Suite 1001 Albany, NY 12207	Line <u>3.436</u>  <input type="checkbox"/> Not listed. Explain _____
4.7	<b>Paula Barbaruolo, Esq.</b> 12 Cornell Road Latham, NY 12110	Line <u>3.436</u>  <input type="checkbox"/> Not listed. Explain _____
4.8	<b>Relin, Goldstein, &amp; Crane LLP</b> 28 East Main Street, Suite 1800 Rochester, NY 14614	Line <u>3.148</u>  <input type="checkbox"/> Not listed. Explain _____
4.9	<b>Ryant T. Donovan, Esq.</b> Conway, Donovan, & Manley, PLLC 50 State Street, 2nd Fl. Albany, NY 12207	Line <u>3.436</u>  <input type="checkbox"/> Not listed. Explain _____
4.10	<b>ServiceLink, LLC</b> P.O. Box 5111327 Los Angeles, CA 90051-8014	Line <u>3.357</u>  <input type="checkbox"/> Not listed. Explain _____
4.11	<b>The Hartford Financial Services Group</b> P.O. Box 783690 Philadelphia, PA 19178	Line <u>3.388</u>  <input type="checkbox"/> Not listed. Explain _____
4.12	<b>Wells Fargo Auto Finance</b> 435 Ford Road Minneapolis, MN 55426	Line <u>3.430</u>  <input type="checkbox"/> Not listed. Explain _____

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

	<b>Total of claim amounts</b>
5a. Total claims from Part 1	5a. \$ <b>72,991.60</b>
5b. Total claims from Part 2	5b. + \$ <b>1,929,538.94</b>

Debtor Schiller, Knapp, Lefkowitz, & Hertzel, LLP  
Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**5c. Total of Parts 1 and 2**  
Lines 5a + 5b = 5c.

5c. \$ 2,002,530.54

Fill in this information to identify the case:

Debtor name Schiller, Knapp, Lefkowitz, & Hertzel, LLP

United States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORK

Case number (if known) \_\_\_\_\_

Check if this is an amended filing

## Official Form 206G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

#### 2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

**Membership Dues**

State the term remaining

**2 months**

**ALFN c/o Schmersahl Treloar & Co, PC  
Attn: Mark O'Donnell  
10805 Sunset Office Drive - Suite 400  
Saint Louis, MO 63127**

List the contract number of any government contract

2.2. State what the contract or lease is for and the nature of the debtor's interest

**Latham, NY - Commercial Lease**

State the term remaining

**B/A Properties, LLC  
19 British American Blvd.  
Latham, NY 12110**

List the contract number of any government contract

2.3. State what the contract or lease is for and the nature of the debtor's interest

**Commercial Landlord - Pittsburgh**

State the term remaining

**Greater Commonwealth Investors Assoc. LP  
c/o H.L. Libby Corp.  
803 Commonwealth Drive  
Warrendale, PA 15086**

List the contract number of any government contract

2.4. State what the contract or lease is for and the nature of the debtor's interest

**Server Lease**

State the term remaining

**Hewlett-Packard Financial Services Co  
200 Connell Drive - Suite 5000  
Berkeley Heights, NJ 07922**

List the contract number of any government contract

Debtor 1 **Schiller, Knapp, Lefkowitz, & Hertzel, LLP**

First Name

Middle Name

Last Name

Case number (if known)

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5.	State what the contract or lease is for and the nature of the debtor's interest	<b>Opened Servers (leased)</b>	
	State the term remaining	<b>53 months</b>	Hewlett-Packard Financial Services Co 200 Connell Drive - Suite 5000 Berkeley Heights, NJ 07922
	List the contract number of any government contract		
2.6.	State what the contract or lease is for and the nature of the debtor's interest	<b>Opened Copiers (leased)</b>	
	State the term remaining	<b>14 months</b>	National Business Leasing A Program of DeLage Landen Financial Svc 1111 Old Eagle School Road Wayne, PA 19087
	List the contract number of any government contract		
2.7.	State what the contract or lease is for and the nature of the debtor's interest	<b>Commercial Landlord - Buffalo</b>	
	State the term remaining		Power Play Partners, LLC P.O. Box 484 Clarence Center, NY 14032
	List the contract number of any government contract		
2.8.	State what the contract or lease is for and the nature of the debtor's interest	<b>HR Services</b>	
	State the term remaining	<b>2 months</b>	Puzzle HR 4030 West Boy Scout Blvd - suite 325 Tampa, FL 33607
	List the contract number of any government contract		
2.9.	State what the contract or lease is for and the nature of the debtor's interest	<b>Commercial Landlord - NJ</b>	
	State the term remaining		Renob, LLC c/o The Falcon Group 95 Mount Bethel Road Warren, NJ 07059
	List the contract number of any government contract		

Debtor 1 **Schiller, Knapp, Lefkowitz, & Hertzel, LLP**

First Name

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

**Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.10. State what the contract or lease is for and the nature of the debtor's interest

**Membership Dues**

State the term remaining

**7 months**

List the contract number of any government contract

**USFN****9001 Airport Freeway - Suite 740  
North Richland Hills, TX 76180**

**Fill in this information to identify the case:**

Debtor name **Schiller, Knapp, Lefkowitz, & Hertzel, LLP**

United States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORK

Case number (if known)

Check if this is an amended filing

**Official Form 206H  
Schedule H: Your Codebtors**

12/15

**Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.**

### **1. Do you have any codebtors?**

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
 Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G.** Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

**Column 1: Codebtor**

**Column 2: Creditor**

Name	Mailing Address	Name	<i>Check all schedules that apply:</i>
2.1 <b>Daniel Young</b>	<b>35 Nelson Farm Road Moretown, VT 05660</b>		<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
<hr/>			
2.2 <b>Gary Lefkowitz</b>	<b>25 Linden Ct Clifton Park, NY 12065</b>		<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
<hr/>			
2.3 <b>Ryan Hertzel</b>	<b>25 Amity Pointe Court Clifton Park, NY 12065</b>		<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
<hr/>			
2.4 <b>William Schiller</b>	<b>703 Sachem Circle Slingerlands, NY 12159</b>		<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

Fill in this information to identify the case:

Debtor name **Schiller, Knapp, Lefkowitz, & Hertzel, LLP**

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF NEW YORK**

Case number (if known) \_\_\_\_\_

Check if this is an amended filing

## Official Form 207

### Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

#### Part 1: Income

##### 1. Gross revenue from business

None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue  
Check all that apply

Gross revenue  
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:  
From 1/01/2023 to Filing Date

Operating a business

\$2,100,000.00

Other \_\_\_\_\_

For prior year:  
From 1/01/2022 to 12/31/2022

Operating a business

\$6,386,000.00

Other \_\_\_\_\_

For year before that:  
From 1/01/2021 to 12/31/2021

Operating a business

\$5,889,865.00

Other \_\_\_\_\_

##### 2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None.

Description of sources of revenue

Gross revenue from each source  
(before deductions and exclusions)

#### Part 2: List Certain Transfers Made Before Filing for Bankruptcy

##### 3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer  
Check all that apply

Debtor

Schiller, Knapp, Lefkowitz, & Hertzel, LLP

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer Check all that apply
3.1. M&T Bank -Special Assets Department Mr. Kenneth Paulin, Jr. One Fountain Plaza - 9th Floor Buffalo, NY 14203	5/16/23	\$18,746.78	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Bank elected set-off</u>

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

 None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. Ryan Hertzel, Esq. 25 Amity Point Clifton Park, NY 12065 Former Partner	Bi-weekly salary	\$0.00	Salary (See SOFA item 30)
4.2. Gary Lefkowitz, Esq. 25 Linden Ct, Clifton Park, NY 12065 Partner	Bi-weekly Salary	\$0.00	Salary (See SOFA item 30)
4.3. Daniel Young, Esq. 38 Nelson Farm Road Moretown, VT 05660 Partner	Bi-weekly Salary	\$0.00	Salary (See SOFA item 30)

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

 None

Creditor's name and address	Describe of the Property	Date	Value of property
-----------------------------	--------------------------	------	-------------------

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

 None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
M&T Bank -Special Assets Department Mr. Kenneth Paulin, Jr. One Fountain Plaza - 9th Floor Buffalo, NY 14203	Bank account sweep. Last 4 digits of account number: _____	5/16/23	\$18,746.78

**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

Debtor

Schiller, Knapp, Lefkowitz, & Hertzel, LLP

Case number (if known) \_\_\_\_\_

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Advantage Legal v. SKLH 900876-23	Accounts Stated	Albany Co. Supreme Court	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. Advantage v. SKLH 900873-23	Accounts Stated	Albany Co. Supreme Court	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

#### 8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

#### Part 4: Certain Gifts and Charitable Contributions

##### 9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value

#### Part 5: Certain Losses

##### 10. All losses from fire, theft, or other casualty within 1 year before filing this case.

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

#### Part 6: Certain Payments or Transfers

##### 11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None.

Debtor

Schiller, Knapp, Lefkowitz, & Hertzel, LLP

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Boyle Legal LLC 64 2nd Street Troy, NY 12180		5/11/23	\$20,000.00
<b>Email or website address</b> <hr/>			
<b>Who made the payment, if not debtor?</b> <hr/>			

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.  
Do not include transfers already listed on this statement.

 None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
-------------------------	-----------------------------------	---------------------------	-----------------------

**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

 None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

 Does not apply

Address	Dates of occupancy From-To
14.1. 950 New Loudon Road Latham, NY 12110	12/1998-11/2020

**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

 No. Go to Part 9. Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	--	---

**Part 9: Personally Identifiable Information**

**16. Does the debtor collect and retain personally identifiable information of customers?**

No.  
 Yes. State the nature of the information collected and retained.

**Personal Identifying Information (names, addresses, numbers, EINs, SSNs, etc.)**

Does the debtor have a privacy policy about that information?

No  
 Yes

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

No. Go to Part 10.  
 Yes. Does the debtor serve as plan administrator?

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Capital District Records Management Inc PO Box 4044 Clifton Park, NY 12065	G. Lefkowitz D. Young	Files	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No.  
 Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	----------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

No.  
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

No.  
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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**Part 13: Details About the Debtor's Business or Connections to Any Business**

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.	Date of service From-To
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26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

None

Name and address	Date of service From-To
------------------	----------------------------

26a.1. **BST & Co., CPA's, LLP**  
**10 British American Blvd**  
**Latham, NY 12110**

26a.2. **Tronconi Segarra & Associates LLP**  
**8321 Main Street,**  
**Buffalo, NY 14221**

Debtor Schiller, Knapp, Lefkowitz, & Hertz, LLP

Case number (if known) \_\_\_\_\_

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

None

**Name and address****If any books of account and records are unavailable, explain why**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

None

**Name and address**

26d.1. **M&T Bank**  
One Fountain Plaza - 9th Floor  
Buffalo, NY 14203

26d.2. **PennyMac Loan Services, LLC**  
6101 Condor Drive  
Moorpark, CA 93021

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

No

Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
---	-------------------	--

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Gary Lefkowitz	25 Linden Ct Clifton Park, NY 12065		50%

Name	Address	Position and nature of any interest	% of interest, if any
Daniel Young	38 Nelson Farm Road Moretown, VT 05660		50%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No

Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
William Schiller, Esq.	703 Sachem Cir Slingerlands, NY 12159		

Debtor

Schiller, Knapp, Lefkowitz, & Hertzel, LLP

Case number (if known) \_\_\_\_\_

Name	Address	Position and nature of any interest	Period during which position or interest was held
Ryan Hertzel, Esq.	25 Amity Point Clifton Park, NY 12065		

**30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

No  
 Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 Gary Lefkowitz, Esq. 25 Linden Ct, Clifton Park, NY 12065	\$78,183.49	Biweekly Salary (\$3,707.54)	Salary
Relationship to debtor Partner			
30.2 Daniel Young, Esq. 38 Nelson Farm Road Moretown, VT 05660	\$90,020.00	Biweekly Salary (\$4,091.00)	Salary
Relationship to debtor Partner			
30.3 Ryan Hertzel, Esq. 25 Amity Point Clifton Park, NY 12065	\$92,581.56	Biweekly Salary (\$4018.09)	Salary
Relationship to debtor Former Partner			

**31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?**

No  
 Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

**32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?**

No  
 Yes. Identify below.

Name of the pension fund	Employer Identification number of the pension fund
Great West L&A	EIN:

Debtor

Schiller, Knapp, Lefkowitz, & Hertzel, LLP

Case number (if known) \_\_\_\_\_

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 30, 2023/s/ Gary Lefkowitz

Signature of individual signing on behalf of the debtor

Gary Lefkowitz

Printed name

Position or relationship to debtor PartnerAre additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

No  
 Yes

**United States Bankruptcy Court  
Northern District of New York**

In re Schiller, Knapp, Lefkowitz, & Hertzel, LLP

Debtor(s)

Case No.

Chapter

11

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$ <u>20,000.00</u>
Prior to the filing of this statement I have received .....	\$ <u>20,000.00</u>
Balance Due .....	\$ <u>0.00</u>

2. The source of the compensation paid to me was:

Debtor       Other (specify):

3. The source of compensation to be paid to me is:

Debtor       Other (specify):

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  
 I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  
a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;  
b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;  
c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  
d. [Other provisions as needed]

**Firm to charge Debtor on an hourly fee basis pursuant to pre-petition retainer agreement. Firm representation includes:**

**Negotiations with secured creditors to reduce to market value; preparation and filing of motions and applications as needed. Representation of the debtor in any dischargeability actions, lien avoidances, relief from stay actions or any other adversary proceeding.**

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

May 30, 2023

Date

/s/ Michael Boyle

**Michael Boyle**

*Signature of Attorney*

**Boyle Legal LLC**

**64 2nd Street**

**Troy, NY 12180**

**518-687-1648 Fax: 518-**

**mike@boylebankruptcy.com**

*Name of law firm*

**United States Bankruptcy Court  
Northern District of New York**

In re Schiller, Knapp, Lefkowitz, & Hertzel, LLP

Debtor(s)

Case No.

Chapter 11

**LIST OF EQUITY SECURITY HOLDERS**

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
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**Daniel Young**  
**38 Nelson Farm Road**  
**Moretown, VT 05660**

**Gary Lefkowitz**  
**25 Linden Ct**  
**Clifton Park, NY 12065**

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the **Partner** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date May 30, 2023

Signature /s/ Gary Lefkowitz  
Gary Lefkowitz

*Penalty for making a false statement of concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF NEW YORK**

In re Schiller, Knapp, Lefkowitz, & Hertzel, LLP,  
FDBA Schiller & Knapp, LLP

Debtor Case No.

Chapter **11**

Social Security No(s). and all Employer's Tax Identification No(s). *[if any]*  
**14-1809981**

**CERTIFICATION OF MAILING MATRIX**

I,(we), Michael Boyle, the attorney for the debtor/petitioner (or, if appropriate, the debtor(s) or petitioner(s)) hereby certify under the penalties of perjury that the above/attached mailing matrix has been compared to and contains the names, addresses and zip codes of all persons and entities, as they appear on the schedules of liabilities/list of creditors/list of equity security holders, or any amendment thereto filed herewith.

Dated: May 30, 2023

/s/ Michael Boyle  
Michael Boyle  
Attorney for Debtor/Petitioner  
(Debtor(s)/Petitioner(s))

1 Oak Advisory  
Acct No n/a  
2901 West Coast Hwy  
Newport Beach, CA 92663

21st Mortgage Corporation  
Acct No n/a  
1 Market Street, Suite 100  
Knoxville, TN 37902

360 Legal, Inc.  
Acct No n/a  
201 Fletcher Avenue - Suite 100  
Sarasota, FL 34237

3N Document Destruction, Inc.  
Acct No 278  
P.O. Box 4044  
Clifton Park, NY 12065

4908 Associates, LLC  
Acct No n/a  
120 North Main Street  
New City, NY 10956

A. Christine Sano  
5 Hidley Ave.  
Wynantskill, NY 12198

A.W. Hamel Stair Mfg., Inc.  
Acct No n/a  
3111 Amsterdam Road  
Schenectady, NY 12302

a360 Technology Solutions LLC  
Acct No SCHILLER&K  
P.O. Box 679278  
Dallas, TX 75267

AbacusNext HQ  
Acct No xxxx9507  
P.O. Box 31001-4038  
Pasadena, CA 91110-4038

ABC Car Leasing, Inc.  
Acct No n/a  
950 New Loudon Road  
Latham, NY 12110

ABNB Federal Credit Union  
Acct No n/a  
830 Greenbrier Circle  
Chesapeake, VA 23320

Accu-Serve, Ltd  
Acct No n/a  
88 Froehlich Farm Blvd - Suite 403  
Woodbury, NY 11797

Addison County Sheriff  
Acct No n/a  
35 Court Street  
Middlebury, VT 05753

ADP LLC  
Acct No xxx2121  
P.O. Box 842875  
Boston, MA 02284-2875

Advantage Foreclosure Services, Inc.  
Acct No n/a  
201 Old Country Road - Suite 200  
Melville, NY 11747

Advantage Legal Services, Inc  
Acct No n/a  
201 Old Country Road  
Melville, NY 11747

Affinity Consulting Group  
Acct No n/a  
8200 Bryan Dairy Road - Suite 160  
Seminole, FL 33777

AGCO Finance LLC  
Acct No n/a  
PO BOX 2000  
Des Moines, IA 50320

AIS InfoSource LP  
Acct No n/a  
LP 5847 San Felipe Suite 1200  
Houston, TX 77057

AIS Portfolio Services, LP  
Acct No n/a  
LP 5847 San Felipe, Suite 1200  
Houston, TX 77057

Albany Management, Inc.  
Acct No n/a  
4 Computer Drive West  
Albany, NY 12205

Aldridge Pite, LLP  
Acct No n/a  
3575 Piedmont Center, Suite 500  
Atlanta, GA 30305

ALFN c/o Schmersahl Treloar & Co, PC  
Acct No 4114  
Attn: Mark O'Donnell  
10805 Sunset Office Drive - Suite 400  
Saint Louis, MO 63127

Ally Bank serviced by Ally Servicing LLC  
Acct No n/a  
PO Box 130424  
Saint Paul, MN 55113

Alstate Process Service, Inc.  
Acct No n/a  
60 Burt Drive  
Deer Park, NY 11729

AltaTech Asset Management  
Acct No n/a  
139 Fulton Street, Suite 614  
New York, NY 10038

Amanie Akarah-Bailey  
42 Troy View Lane  
Buffalo, NY 14221

American Airlines Credit Union  
Acct No n/a  
PO Box 619001, MD2100  
DFW Airport  
Dallas, TX 75261

American Bank  
Acct No n/a  
4029 W. Tighman Street  
Allentown, PA 18104

American Battlefield Trust  
Acct No n/a  
1156 15th Street, N.W. Suite 900  
Washington, DC 20005

American Credit Acceptance LLC  
Acct No n/a  
961 E Main St,  
Spartanburg, SC 29302

American Honda Finance Corporation  
Acct No n/a  
3625 West Royal Lane, Suite 200  
Irving, TX 75063

American Loan Servicing  
Acct No n/a  
1192 E Draper Pkwy  
Draper, UT 84020

American Mortgage Investment Properties;  
Acct No n/a  
PO BOX 2741  
Seal Beach, CA 90740

AmericanChecked Inc.  
Acct No 8722  
Dept 0208  
P.O. Box 120208  
Dallas, TX 75312-0208

AmeriCredit Financial Services  
Acct No n/a  
PO Box 18353  
Arlington, TX 76096

AMOS Financial LLC  
Acct No n/a  
3330 Skokie Valley Road - Suite 301  
Highland Park, IL 60035

Amy DeAngelus  
598 Dell Road  
Landing, NJ 07850

Animal Clinic of Hampton Bays  
Acct No n/a  
238 W. Montauk Hwy  
Hampton Bays, NY 11946

Anthony Signorelli  
Acct No n/a  
PO BOX 320  
Schroon Lake, NY 12870

Arvest Central Mortgage Company  
Acct No n/a  
801 John Barrow Road, Suite 1  
Little Rock, AR 72205

Ascendus  
Acct No n/a  
80 Maiden Lane  
New York, NY 10038

Ashley Novak  
1325 Blue Factory Hill Road  
Cropseyville, NY 12052

Asset Research Group  
Acct No UNKN  
6011 Knotty Wood Dr  
Houston, TX 77092

Auction.com, LLC  
Acct No UNKN  
1 Mauchly  
Irvine, CA 92618

Avidia Bank  
Acct No n/a  
42 Main Street  
Hudson, MA 01749

B/A Properties, LLC  
Acct No UNKN  
19 British American Blvd.  
Latham, NY 12110

Baldwin Sutphen & Frateschi, PLLC  
Acct No n/a  
126 North Salina Street - Suite 400  
Syracuse, NY 13202-1050

Bank of America, NA  
Acct No n/a  
PO BOX 2759  
Jacksonville, FL 32203

Bank of Bennington  
Acct No n/a  
155 North Street  
Bennington, VT 05201

Barbara Worek  
6914 Keystone Street  
Philadelphia, PA 19135

Barrett, Daffin, Frappier, Levine & Bloc  
Acct No n/a  
780 Johnson Ferry Road, Suite 240  
Atlanta, GA 30342

Bayview Financial  
Acct No n/a  
4425 Ponce De Leon Blvd, 5th Floor  
Miami, FL 33146

Bell Point Shores Homeowners Association  
Acct No n/a  
PO BOX 712  
Bolton Landing, NY 12814

Beltway Capital Management, LLC  
Acct No n/a  
Executive Plaza II  
Hunt Valley, MD 21031

Bennington County Habitat for Humanity  
Acct No n/a  
P.O. Box 1159  
Manchester, VT 05254

Black Knight Servicing Tech. - BK/FC  
Acct No at-sckn  
P.O. Box 849277  
Los Angeles, CA 90084-9277

Black Knight Servicing Technologies, LLC  
Acct No D82  
P.O. Box 809007  
Chicago, IL 60680-9007

Black Knight Svcng Technologies, LLC In  
Acct No SCHILLER  
ATTN: Accounting Department  
P.O. Box 842651  
Los Angeles, CA 90084-2651

Blue Bridge Financial, LLC  
Acct No n/a  
535 Washington Street  
Buffalo, NY 14203

Brandon Johnson  
1245 Ridge Avenue - Unit 108  
Philadelphia, PA 19123

Breean VanSolkema  
5358 Main Street  
Waitsfield, VT 05673

Brian Rayment  
Acct No n/a  
7666 E. 61st Street, Ste. 550  
Tulsa, OK 74133

Brittney Wilkinson  
11277 Southwest Lyra Drive  
Port Saint Lucie, FL 34987

Brown & Connery  
Acct No n/a  
360 Haddon Ave.  
Collingswood, NJ 08108

BSI Financial Services  
Acct No n/a  
7500 Old Georgetown Road, Suite 1350  
Bethesda, MD 20814

BST & Co., CPA's, LLP  
Acct No 46027  
10 British American Blvd  
Latham, NY 12110

Buckley King  
Acct No n/a  
1400 Fifth Third Center  
Cleveland, OH 44114

Buckley Madole, P.C.  
Acct No n/a  
14841 Dallas Parkway, Suite 300  
Dallas, TX 75254

C&C Lending  
Acct No n/a  
1844 Darrow Road  
Duanesburg, NY 12056

Calendar Call LLC  
Acct No n/a  
108 Roxbury Drive  
Commack, NY 11725

Caliber Home Loans  
Acct No n/a  
3701 Regent Blvd  
Irving, TX 75063

Cap Com FCU  
Acct No n/a  
4 Winners Circle  
Albany, NY 12205

Capital Affordable Housing Funding Corp  
Acct No n/a  
255 Orange Street  
Albany, NY 12210

Capital Bank/Chemung Canal Trust Company  
Acct No n/a  
1 Chemung Canal Plaza  
Elmira, NY 14901

Capital District Records Management Inc  
Acct No 278  
PO Box 4044  
Clifton Park, NY 12065

Carnow Acceptance Corporation  
Acct No n/a  
2017 Central Ave.  
Albany, NY 12205

Carolyn Matthei  
901 Park Avenue - Apt 5  
Albany, NY 12208

Carrington Mortgage Services, LLC  
Acct No n/a  
1600 South Douglass Road, Suite 200  
Anaheim, CA 92806

Carter Federal Credit Union  
Acct No n/a  
100 West Church Street  
Springhill, LA 71075

Casella Waste Mgt, Inc  
Acct No xxx1707  
Williston, VT 05495-1372

Catherine Bradwell  
Acct No n/a  
2 Bergen Woods Drive  
Cohoes, NY 12047

Catholic & Community Credit Union  
Acct No n/a  
6100 West Main Street  
Belleville, IL 62223

Cenlar  
Acct No n/a  
425 Phillips Blvd  
Trenton, NJ 08618

CFAM Financial Services, LLC  
Acct No n/a  
PO BOX 601329  
Dallas, TX 75360

Chambles Math Carr PC  
Acct No n/a  
5720 Carmichael Road  
Montgomery, AL 36117

Champion Mortgage  
Acct No n/a  
11 Eves Dr  
Marlton, NJ 08053

Chittenden County Sheriff  
Acct No n/a  
70 Ethan Allen Drive,  
South Burlington, VT 05403

Chrono Solutions, LLC  
Acct No n/a  
1199 S. Belt Line Road  
Coppell, TX 75019

Circle Management Group, LLC  
Acct No 1918  
P.O. Box 5091  
High Point, NC 27262

City of Johnstown  
Acct No n/a  
33-41 East Main Street  
PO BOX 160  
Johnstown, NY 12095

CLAIR & GJERTSEN  
Acct No n/a  
4 New King Street  
West Harrison, NY 10604

ClearSpring Loan Services, Inc.  
Acct No n/a  
5220 Tennyson Parkway Suite 200,  
Plano, TX 75024

CM Asset Management LLC  
Acct No n/a  
PO Box 592  
Berthoud, CO 80513

Cohn & Roth  
Acct No n/a  
100 East Old Country Road  
Mineola, NY 11501

Colonial Savings  
Acct No n/a  
2626 B West Freeway  
Fort Worth, TX 76102

Community Loan Servicing, LLC  
Acct No n/a  
4425 Ponce De Leon Blvd, 5th Floor  
Miami, FL 33146

Condor Capital Corp.  
Acct No n/a  
165 Oser Ave  
Hauppauge, NY 11788-8827

Connie Spross  
4823 Comly Street  
Philadelphia, PA 19135

Cooksey, Toolen, Gage, Duffy & Woog  
Acct No n/a  
535 Anton Blvd., 10th Floor  
Costa Mesa, CA 92626

Costello, Cooney & Fearon, PLLC  
Acct No n/a  
5701 West Genesee Street  
Camillus, NY 13031

Court Solutions LLC  
Acct No n/a  
641 Lexington Avenue - Suite 1920  
New York, NY 10022

CourtDrive  
Acct No n/a  
4500 Park Granada Blvd - Suite 202  
Calabasas, CA 91302

Covius Settlement Services, LLC  
Acct No Schiller & Knapp, LLP  
720 South Colorado Blvd - Suite 210  
P.O. Box 469089  
Denver, CO 80246

Covius Settlement Services, LLC  
Acct No Schiller & Knapp, LLP  
1044 Main Street, Suite 700  
Kansas City, MO 64105

Credit Union of Georgia  
Acct No n/a  
69 South Ave.  
Marietta, GA 30060

CTF Asset Management, LLC  
Acct No n/a  
117 Wrangler Drive  
Coppell, TX 75019

Dan Lombardi  
Acct No n/a  
187 Wolf Road  
Albany, NY 12205

Daniel Young  
35 Nelson Farm Road  
Moretown, VT 05660

Daniel Young, Esq.  
38 Nelson Farm Road  
Moretown, VT 05660

Dannemora Federal Credit Union  
Acct No n/a  
344 Tom Miller Road  
Plattsburgh, NY 12901

Davidson Fink LLP  
Acct No n/a  
400 Meridian Centre Blvd suite 200,  
Rochester, NY 14618

Dawson & Albritton, P.A.  
Acct No n/a  
204 E. Arlington Blvd  
Greenville, NC 27835

De Lage Landen  
Acct No n/a  
8001 Birchwood Court  
Johnston, IA 50131

Deily & Schaefer, Esqs.  
Acct No n/a  
One Bridge Street  
PO Box 489  
Catskill, NY 12414

Delano, Jeffrey & Delano, Pamela A.  
Acct No n/a  
600 Charlton Rd.  
Ballston Spa, NY 12020

Delta Community Credit Union  
Acct No n/a  
Sibcy Cline Florence Office  
4885 Houston Rd building suite 102  
Florence, KY 41042

Den Adelsman Klub, Inc.  
Acct No n/a  
305 East 4th Street  
Jamestown, NY 14702

DGR Subpoena & Messenger Svc, Inc.  
Acct No xCH50  
1359 Littleton Rd  
Morris Plains, NJ 07950-3000

DLM Conesus Lake Associates, LLC.  
Acct No n/a  
60 Waltham Ave  
Lancaster, NY 14086

Dovenmuehle Mortgage, Inc.  
Acct No n/a  
1 Corporate Drive, Suite 360  
Lake Zurich, IL 60047

DTF Asset Management, LLC  
Acct No n/a  
117 Wrangler Drive  
Irving, TX 75016

E-Law, LLC  
Acct No x6724  
219 South Street, Suite 102  
New Providence, NJ 07974

Earle & Freeman PLC  
Acct No n/a  
107 State Street - 3rd Floor  
P.O. Box 1385  
Montpelier, VT 05601-1385

East Coast Funding Group, Inc  
Acct No n/a  
277 Northern Blvd  
Great Neck, NY 11021

EasySoft Legal Software  
Acct No n/a  
Three 2nd Street - Suite 501  
Jersey City, NJ 07302

Edwards Mental Health  
Acct No n/a  
7 Corporate Drive  
Clifton Park, NY 12065

Egress Software Technologies Inc  
Acct No UNKN  
One Marina Park Drive - Suite 1410  
Boston, MA 02210

Eleanor Pers  
Acct No n/a  
12 Timberland Drive  
Albany, NY 12211

Elliot Smeltzer  
61 Johnson Rd.  
Latham, NY 12110

Emberly-Rayn Boncie  
Acct No n/a  
1011 Cheyenne Rd  
Schenectady, NY 12302

Entec Consultants, Inc.  
Acct No n/a  
1200 New Loudon Road  
Cohoes, NY 12047

Eric Feldman & Associates, P.C.  
Acct No n/a  
123 W. Madison Street  
Chicago, IL 60602

Erin Mesmer  
2746 Love Road  
Grand Island, NY 14072

Ernststrom & Dreste, LLP  
Acct No n/a  
925 Clinton Square  
Rochester, NY 14604

Evans Petree, PC  
Acct No n/a  
1000 Ridgeway Loop Road, Suite 200  
Memphis, TN 38120

Evocative  
Acct No xx2596  
Dept LA 25225  
Pasadena, CA 91185-5185

Fannie Mae  
Acct No n/a  
780 Third Avenue, 9th Floor  
New York, NY 10017

Fay Servicing, LLC  
Acct No n/a  
440 S. LaSalle, Suite 2000  
Chicago, IL 60605

FCI Lender Services, Inc.  
Acct No n/a  
P.O. Box 27370  
Anaheim, CA 92809-0112

Federal Express  
Acct No 7923  
942 South Shady Grove Road  
Memphis, TN 38120

Federal Home Loan Bank of New York  
Acct No n/a  
101 Park Avenue  
New York, NY 10178

Fein, Such & Crane, LLP  
Acct No n/a  
7 Century Drive, Suite, 201  
Parsippany, NJ 07054

Fidelity National Title Insurance Compan  
Acct No n/a  
80 State St Suite 10  
Albany, NY 12207

Financial Asset Services, Inc.  
Acct No n/a  
17752 Mitchell N. Suite A  
Irvine, CA 92614

First Integrity Title  
Acct No UNKN  
18201 Von Karman - Suite 330  
Irvine, CA 92612

First Internet Bank  
Acct No n/a  
11201 USA Parkway  
Fishers, IN 46037

First National Bank of Scotia  
Acct No n/a  
201 Mohawk Avenue  
Schenectady, NY 12302

First New York Federal Credit Union  
Acct No n/a  
2 Wall Street  
Albany, NY 12205

First Niagara Bank, N.A.  
Acct No n/a  
PO BOX 514  
Lockport, NY 14095

Firststar Investors, LLC  
Acct No n/a  
25 Dogleg Lane  
Roslyn Heights, NY 11577

Firststar Motel, LLC  
Acct No n/a  
25 Dogleg Lane  
Roslyn Heights, NY 11577

Firststar West Court, LLC  
Acct No n/a  
25 Dogleg Lane  
Roslyn Heights, NY 11577

Flagship Credit Acceptance, LLC  
Acct No n/a  
PO BOX 965  
Chadds Ford, PA 19317

Ford Motor Credit Company LLC  
Acct No n/a  
PO BOX 6275  
Dearborn, MI 48121

Fortune Title Agency, Inc.  
Acct No n/a  
39 Woodland Road  
Roseland, NJ 07068

Foundations Property Management, LLC  
Acct No n/a  
1528 Wharton Street  
Philadelphia, PA 19146

FP Mailing Solutions  
Acct No xxxxx6416  
140 N. Mitchell Ct - Suite 200  
Addison, IL 60101-5629

Franklin Credit Management Corporation  
Acct No n/a  
101 Hudson Street, 25th Floor  
Jersey City, NJ 07302

Freedom Mortgage□  
Acct No n/a  
10500 Kincaid Drive  
Fishers, IN 46037

Freedom Truck Finance  
Acct No n/a  
421 W. Third Street  
Fort Worth, TX 76102

Friedman Vartolo LLP  
Acct No n/a  
85 Broad Street  
New York, NY 10004

Frontier Abstract & Researchers, Inc.  
Acct No n/a  
69 Cascade Drive - Suite 101  
Rochester, NY 14614

Fulton County Treasurer  
Acct No n/a  
County Office Building  
223 West Main Street  
Johnstown, NY 12095

Galanis, Pollack, Jacobs & Johnson, S.C.  
Acct No n/a  
839 N. Jefferson Street, Suite 200  
Milwaukee, WI 53202

Garden State Legal Services Corp.  
Acct No n/a  
600 Lawrence Road  
Lawrence Township, NJ 08648

Gary DiMauro Real Estate, Inc  
Acct No n/a  
58 Broadway  
Tivoli, NY 12583

Gary Lefkowitz  
25 Linden Ct  
Clifton Park, NY 12065

Gary Lefkowitz, Esq.  
25 Linden Ct,  
Clifton Park, NY 12065

Generation Mortgage Company  
Acct No n/a  
3565 Piedmont Road  
Atlanta, GA 30305

Getnick, Livingston, Atkinson & Priore,  
Acct No n/a  
258 Genesee Street  
Utica, NY 13502

Gillespie Fuels & Propane, Inc  
Acct No UNKN  
5197 Main Street  
Waitsfield, VT 05673

GITSIT Solutions, LLC  
Acct No n/a  
333 South Anita Drive, Suite 400  
Orange, CA 92868

Gleichenhaus, Marchese & Weishaar PC  
Acct No n/a  
930 Convention Tower 43 Court St  
Buffalo, NY 14202-3100

Glens Falls National Bank and Trust Comp  
Acct No n/a  
250 Glen Street  
Glens Falls, NY 12801

GoAmerica, LLC  
Acct No n/a  
3115 S. Melrose Drive  
Carlsbad, CA 92010

Goldberger and Kremer  
Acct No n/a  
39 North Pearl Street, Suite 201  
Albany, NY 12207

Great Lakes Credit Union  
Acct No n/a  
PO BOX 1289  
Deerfield, IL 60015

Greater Commonwealth Investors Assoc. LP  
Acct No n/a  
c/o H.L. Libby Corp.  
803 Commonwealth Drive  
Warrendale, PA 15086

Greater Commonwealth Investors Assoc. LP  
Acct No n/a  
c/o H.L. Libby Corp.  
P.O. Box 62336-16  
Baltimore, MD 21264

Green Lake Homestead Inc  
Acct No n/a  
100 Harbor View Dr  
Port Washington, NY 11050

Green Mountain Power  
Acct No 33493  
163 Acorn Lane  
Colchester, VT 05446

Green Planet Servicing, LLC  
Acct No n/a  
321 Research Pkwy  
Meriden, CT 06450

Green River Capital LLC  
Acct No n/a  
1670 Old Country Rd Ste 220  
Plainview, NY 11803

Greene County Treasurer  
Acct No n/a  
411 Main Street  
Catskill, NY 12414

Greenspoon Marder LLP  
Acct No n/a  
Trade Centre South, Suite 700  
100 West Cypress Road  
Fort Lauderdale, FL 33309

Greg Mascitti, Esq.  
Acct No 0026  
McCarter & English, LLP  
825 Eighth Ave, 31st Floor  
New York, NY 10019

Gregory Funding, LLC  
Acct No n/a  
PO Box 230579  
Portland, OR 97281

Greystone Servicing Company LLC  
Acct No n/a  
419 Belle Air Lane  
Warrenton, VA 20186

Guaranty Bank  
Acct No n/a  
400 West Brown Deer Road  
Milwaukee, WI 53209

Guardian  
Acct No n/a  
PO Box 677458  
Dallas, TX 75267-7458

Habitat for Humanity of Dutchess County,  
Acct No n/a  
8 Neptune Road  
Poughkeepsie, NY 12601

Hagwood and Tipton PC  
Acct No n/a  
ATTN: Amy Leslie  
PO Box 726  
Paris, TN 38242

Hahn Loeser & Parks, LLP  
Acct No n/a  
200 Public Square # 2800  
Cleveland, OH 44114

Handel & Carlini, LLP  
Acct No n/a  
62 E Main Street  
Wappingers Falls, NY 12590

Harris Beach, PLLC  
Acct No n/a  
99 Gamsey Road  
Pittsford, NY 14534

Headlands Asset Management  
Acct No n/a  
765 Baywood Drive, Suite 340  
Petaluma, CA 94954

Hershiser Capital Finance  
Acct No n/a  
30699 Russell Ranch Road  
Thousand Oaks, CA 91362

Hewlett-Packard Financial Services Co  
Acct No 5467567909  
200 Connell Drive - Suite 5000  
Berkeley Heights, NJ 07922

Highmark BSNENY  
Acct No UNKN  
40 Century Hill Drive  
Latham, NY 12110

Hill Wallack, LLP  
Acct No n/a  
240 Cedar Knolls Road  
Cedar Knolls, NJ 07927

Hudson Heritage Federal Credit Union  
Acct No n/a  
25 Rykowski Lane  
Middletown, NY 10941

Hudson Valley Credit Union  
Acct No n/a  
137 Boardman Road  
Poughkeepsie, NY 12603

Hyundai Capital America dba Kia Motor Fi  
Acct No n/a  
10550 Talbert Avenue  
Fountain Valley, CA 92728-0809

i-Evolve  
Acct No UNKN  
501 John James Audubon Parkway - Suite 2  
Buffalo, NY 14228

Ianniello Anderson, PC  
Acct No n/a  
8 Airline Drive  
Albany, NY 12205

IMail Tracking, LLC  
Acct No n/a  
9620 Ridgehaven Court - Suite A  
San Diego, CA 92123

Innovate Loan Servicing  
Acct No n/a  
4704 Mercantile Drive  
Fort Worth, TX 76137

Internal Revenue Service  
Acct No n/a  
Centralized Insolvency Operation  
PO Box 7346  
Philadelphia, PA 19101-7346

Internet Marketing Ninjas  
Acct No n/a  
3 Orchard Drive  
Queensbury, NY 12804

IPFS  
Acct No n/a  
3522 Thomasville Road - Suite 400,  
Tallahassee, FL 32309

IPFS  
Acct No n/a  
170 Northpointe Parkway - Suite 300  
Buffalo, NY 14228

J. Ward Holliday & Associates, P.C.  
Acct No n/a  
5930 Royal Lane, Suite 279  
Dallas, TX 75230

JAYA Properties LLC  
Acct No n/a  
151 Wentworth Avenue  
Albertson, NY 11507

JDRMDBPP, SM, SKP & JD IRA LLC  
Acct No n/a  
408 Main Street  
Boonton, NJ 07005

Jefferson Capital Systems, LLC  
Acct No n/a  
16 McLeland Rd.  
Saint Cloud, MN 56303

Jennifer Spretty  
15 Bluebird Ct.  
Waterford, NY 12188

Jennifer Yetman  
4028A Door Stone Drive  
Latham, NY 12110

Jerome Spitzer  
Acct No n/a  
Jerome Spitzer  
New York, NY 10016

Joann Cummings  
Acct No n/a  
5 Sweeney Rd  
Mechanicville, NY 12118

John A. Hamelin  
Acct No n/a  
160 East Avenue  
Saratoga Springs, NY 12866

John H. Fisher, P.C.  
Acct No n/a  
278 Wall Street  
Kingston, NY 12401

John Joseph Gable, Esq.  
Acct No n/a  
17 British American Blvd.  
Latham, NY 12110

Jonathan Warner, Esq.  
Acct No SLH  
Warner & Warner, PLLC  
6 Automation Lane, Suite 109  
Albany, NY 12205

JP&R Advertising Agency, Inc.  
Acct No UNKN  
305 Broadway, Suite 200  
New York, NY 10007

Kassandra Pangallo  
123 1st Ave  
Mechanicville, NY 12118

Katherine Sticer  
15825 State Route 22  
Stephentown, NY 12168

Kathryn Legg  
89 South Allen Street  
Albany, NY 12208

Kathy McCullough Day  
21 David Avenue  
Troy, NY 12180

Katie Graff  
209 Bates Rd.  
Medina, NY 14103

KeyBank NA  
Acct No n/a  
4224 Ridge Lea Road  
Buffalo, NY 14226

Kelly Borello  
8100 W. Highway 98 - Apt 410  
Pensacola, FL 32506

KeyBank National Association  
Acct No n/a  
127 Public Square  
Cleveland, OH 44114

Keystone Asset Management, Inc.  
Acct No n/a  
890 Forty Foot Road  
Lansdale, PA 19446

Kirkland Financial LLC  
Acct No n/a  
3000 Business Park Circle, Suite 500  
Goodlettsville, TN 37072

Knuckles & Komosinski, PC  
Acct No n/a  
220 White Plains Road, 6th Floor  
Tarrytown, NY 10591

Kozeny, McCubbin & Katz, LLP  
Acct No n/a  
395 North Service Road, Suite 401  
Melville, NY 11747

Kubota Credit Corporation  
Acct No n/a  
6300 at One Kubota Way  
Groveport, OH 43125

Lakeview Loan Servicing  
Acct No n/a  
4425 Ponce de Leon MS 5-251  
Miami, FL 33146

Land Home Financial Services, Inc  
Acct No n/a  
228 Park Avenue South # 67157  
New York, NY 10003

Laura Guzior  
22 Hoffman Drive  
Latham, NY 12110

Lauren Farrelly  
5 Lindberg Drive  
Latham, NY 12110

Law Offices of Gary Holt  
Acct No n/a  
2356 Moore St.  
San Diego, CA 92110

Law Offices of Jeffrey W. Shub  
Acct No n/a  
27 Congress Street  
Salem, MA 01970

Lease and Rental Management Corp.  
Acct No n/a  
45 Haverhill Street  
ATTN: Mary Hawkins  
Andover, MA 01810

Lease Plan U.S.A., Inc.  
Acct No n/a  
1165 Sanctuary Parkway  
Alpharetta, GA 30009

Lee & Mason Financial Services, Inc.  
Acct No n/a  
719 State Route 30  
Northville, NY 12134

Lefkoff, Rubin & Gleason  
Acct No n/a  
5555 Glenridge Connector NE, Suite 900  
Atlanta, GA 30342-4762

Lefkoff, Rubin, Gleason, Russo & William  
Acct No n/a  
5555 Glenridge Connector NE, Suite 900  
Atlanta, GA 30342

Lehrman, Lehrman & Guterman LLP  
Acct No n/a  
199 Main Street  
White Plains, NY 10601

Leigh Hoffman, Esq.  
Acct No n/a  
Lippes Mathias LLP  
54 State Street, Suite 1001  
Albany, NY 12207

Lemery Greisler LLC  
Acct No n/a  
677 Broadway, 8th Floor  
Albany, NY 12207

LenderLive Settlement Services LLC  
Acct No n/a  
1044 Main Street, Suite 700  
Kansas City, MO 64105

Leonard DePasquale  
1150 Millington Road  
Schenectady, NY 12309

Leopold & Associates, PLLC  
Acct No n/a  
80 Business Park Drive, Suite 110  
Armonk, NY 10504

Levin & Glasser, P.C.  
Acct No n/a  
420 Lexington Avenue  
New York, NY 10170

Levine & Block  
Acct No n/a  
PO Box 422148  
Atlanta, GA 30342

Liccoln Archives Inc.  
Acct No 900  
155 Great Arrow Ave  
Buffalo, NY 14207

Linda Overby  
79 Bridgewood Lane  
Watervliet, NY 12189

Lipsey, Morrison, Waller & Lipsey, PC  
Acct No n/a  
1430 Island Home Avenue  
Knoxville, TN 37920

Lisa Gadomski  
58 Whitney Road South  
Saratoga Springs, NY 12866

Little Motors  
Acct No n/a  
363 Central Avenue  
Albany, NY 12206

Live Oak Bank  
Acct No n/a  
1741 Tiburon Drive  
Wilmington, NC 28403

Loan Portfolio Servicing  
Acct No n/a  
6750 Locke Ave.  
Fort Worth, TX 76116

LoanCare- A ServiceLink Company  
Acct No n/a  
3637 Sentara Wat  
Virginia Beach, VA 23452

Local 888, UFCW  
Acct No n/a  
Attn: Michael C. Anderson, Esq.  
Elmsford, NY 10523-1955

M&T Bank -Special Assets Department  
Acct No 0042  
Mr. Kenneth Paulin, Jr.  
One Fountain Plaza - 9th Floor  
Buffalo, NY 14203

M. J. Peterson - 200 Audubon, LLC  
Acct No n/a  
200 John James Audubon Parkway  
Suite 300  
Buffalo, NY 14228

Macey, Wilensky, Kessler & Hennings, LLC  
Acct No n/a  
303 Peachtree Street NE, Suite 4420  
Atlanta, GA 30308

Mackie Wolf Zientz & Mann, P.C.  
Acct No n/a  
124 W. Capitol Ave.  
Little Rock, AR 72201

Marcia & Jules Patricof  
Acct No n/a  
PO BOX 427  
Woodmere, NY 11598

Marilyn Krupnick  
Acct No n/a  
4 Dyers Court  
East Setauket, NY 11733

Mariners Companies  
Acct No n/a  
1303 Avocado Ave Suite 200  
Newport Beach, CA 92660

Martin, Oliveira & Hamel  
Acct No n/a  
75 South Church St., Suite 550  
Pittsfield, MA 01201

Marvin and Marvin, PLLC  
Acct No n/a  
PO BOX 151, 44 West Market Street  
Rhinebeck, NY 12572

McCabe, Weisberg & Conway PC  
Acct No n/a  
123 South Broad Street Suite 1400  
Philadelphia, PA 19109

McCalla Raymer Leibert Pierce, LLC  
Acct No n/a  
1544 Old Alabama Road  
Roswell, GA 30076

McCarthy Holthus, LLP  
Acct No n/a  
108 First Avenue South - Suite 300  
Seattle, WA 98104

McManimon, Scotland & Baumann, LLC  
Acct No n/a  
75 Livingston Avenue  
Roseland, NJ 07068

McMichael Taylor Gray, LLC.  
Acct No n/a  
3550 Engineering Dr - Suite 260  
Norcross, GA 30092

Mercedes-Benz Financial Services USA LLC  
Acct No n/a  
14372 Heritage Pkwy  
Fort Worth, TX 76177

MetLife  
Acct No n/a  
P.O. Box 783895  
Philadelphia, PA 19178-3895

Michael A. Alfieri, Esq.  
Acct No n/a  
30 Freneau Ave # 2A  
Matawan, NJ 07747

Michael Andrews and Associates LLC  
Acct No n/a  
POB 3875  
Southfield, MI 48037-3875

Michael Benson  
Acct No n/a  
2525 County Route 5  
New Lebanon, NY 12125

Michael F. Smith  
Acct No n/a  
12 Timberland Drive  
Albany, NY 12211

Michael J. Biscone  
Acct No n/a  
151 Main St  
Ravenna, NY 12143

Mid Florida Financing LLC  
Acct No n/a  
1200 West Memorial Blvd  
Lakeland, FL 33815

Mid-Hudson Valley Federal Credit Union  
Acct No n/a  
PO BOX 1429  
1099 Morton Blvd  
Kingston, NY 12401

MidCountry Bank  
Acct No n/a  
7825 Washington Avenue South, Ste 120  
Minneapolis, MN 55439

Middlesex County Sheriff  
Acct No n/a  
701 Livingston Avenue,  
New Brunswick, NJ 08901

Midland Mortgage  
Acct No n/a  
999 NW Grand Blvd  
Oklahoma City, OK 73118

Millsap & Singer, LLC  
Acct No n/a  
612 Spirit Drive  
Chesterfield, MO 63005

Monaghan Safar Ducham PLCC  
Acct No n/a  
156 Battery Street  
Burlington, VT 05401

Monmouth County Sheriff  
Acct No n/a  
2500 Kozloski Road,  
Freehold, NJ 07728

Mortgage America  
Acct No n/a  
1425 Grape Street  
Whitehall, PA 18052

Mortgage of America  
Acct No n/a  
1425 Grape Street  
Whitehall, PA 18052

Naiman Law Group, PC  
Acct No n/a  
4660 La Jolla Drive, Suite 650  
San Diego, CA 92122

Nancy Green Montiel  
81 English Road  
Round Lake, NY 12151

National Bank of Coxsackie  
Acct No n/a  
3-7 Reed Street  
PO Box 400  
Coxsackie, NY 12051

National Business Leasing  
Acct No xxx3920  
PO Box 41602  
Philadelphia, PA 19101-1602

National Business Leasing  
A Program of DeLage Landen Financial Svc  
1111 Old Eagle School Road  
Wayne, PA 19087

National Business Technologies  
Acct No x-SA03  
15 Corporate Circle  
Albany, NY 12203

National Grid  
Acct No n/a  
300 Erie Blvd West,  
Syracuse, NY 13202-0960

National Response Corp.  
Acct No n/a  
19 National Dr.  
Franklin, MA 02038

Nationstar Mortgage, LLC d/b/a Mr. Coope  
Acct No n/a  
350 Highland Drive  
Lewisville, TX 75067

Nationwide Court Services Inc.  
Acct No SCHKNA  
761 Koehler Ave. - Suite A  
Ronkonkoma, NY 11779

Nelson Law Group, PLLC  
Acct No SCHKNA  
761 Koehler Ave. - Suite A  
Ronkonkoma, NY 11779

Nesson, Barry, Esq.  
Acct No n/a  
700 White Plains Road  
Scarsdale, NY 10583

NetDirector, LLC  
Acct No SAK01  
3450 Buschwood Park Drive - Suite 110  
Tampa, FL 33618

New England Newspapers  
Acct No n/a  
P.O. Box 1171  
Pittsfield, MA 01202

New York State Dept. of Tax and Finance  
Acct No n/a  
Bankruptcy Section  
PO BOX 5300  
Albany, NY 12205-0300

Nicholas Financial, Inc.  
Acct No n/a  
2454 McMullen Booth Rd., Bldg C  
Clearwater, FL 33759

NLR, Inc.  
Acct No n/a  
4 Revay Road  
East Windsor, CT 06088

Normandy Corporation  
Acct No n/a  
46 Prince Street  
Rochester, NY 14607

North Atlantic Capital Fund I, LLC.  
Acct No n/a  
50 Portland Pier  
Portland, ME 04101

Note Resolutions, LLC  
Acct No n/a  
1135 Clifton Ave, Suite 204  
Clifton, NJ 07013

NoteCraft Capital, LLC  
Acct No n/a  
1619 51st Street  
Seattle, WA 98103

Numerica Credit Union  
Acct No n/a  
P.O. Box 4000  
Veradale, WA 99037

Ocean County Sheriff  
Acct No n/a  
120 Hooper Avenue  
Toms River, NJ 08753

OceanFirst Bank  
Acct No n/a  
907 Route 8 South  
Cape May Court House, NJ 08210

Ocwen Loan Servicing, LLC  
Acct No n/a  
4828 Loop Central Drive  
Houston, TX 77081

Old Heritage Realty Services, LLC  
Acct No n/a  
4 Winners Circle  
Albany, NY 12205

Old Republic National Title Insurance Co  
Acct No n/a  
1200 Liberty Ridge Drive  
Wayne, PA 19087

OneMain Financial Group, LLC  
Acct No n/a  
601 NW Second Street  
Evansville, IN 47708

Optimum  
Acct No UNKN  
1111 Stewart Ave,  
Bethpage, NY 11714-3581

Overit Multimedia, Inc.  
Acct No n/a  
435 New Scotland Avenue  
Albany, NY 12208

PAC Abstract & Title Services LLC  
Acct No n/a  
36 British American Blvd - Suite 102  
Latham, NY 12110

PACCAR Financial Corp  
Acct No n/a  
777 106th Ave NE  
Bellevue, WA 98004

PACER Service Center  
Acct No 2635540  
P.O. Box 780549  
San Antonio, TX 78278

Padfield & Stout, LLP  
Acct No n/a  
421 W. Third Street  
Fort Worth, TX 76102

Padgett Law Group  
Acct No n/a  
5501 LBJ Freeway, Suite 925  
Dallas, TX 75240

Pamela Agard  
30 Park Place  
Saratoga Springs, NY 12866

Patricia Ouellette  
6 Merrall Drive  
Clifton Park, NY 12065

Paul B. Knapp, Esq  
Acct No n/a  
422 Pinkster Ln  
Slingerlands, NY 12159

Paula Barbaruolo, Esq.  
Acct No n/a  
12 Cornell Road  
Latham, NY 12110

PC Law Time Matters LLC  
Acct No 99641099  
2235 Gateway Access Point - Suite 300  
Raleigh, NC 27607

PDA Corporate Stores Division I, LLC  
Acct No n/a  
75-1160563  
Dept #161, P.O. Box 1000  
Memphis, TN 38148-0161

Peet Law Group  
Acct No Schiller Knapp  
55 Patchen Road South  
South Burlington, VT 05403

Pellegrino Law PLLC  
Acct No n/a  
1617 John F. Kennedy Blvd Suite 1888  
Philadelphia, PA 19103

PennyMac Loan Sevices, LLC  
Acct No n/a  
6101 Condor Drive  
Moorpark, CA 93021

Peritus Portfolio Services LLC  
Acct No n/a  
PO BOX 93991  
Southlake, TX 76092

Perl Land Development Corp  
Acct No n/a  
2024 W HENRIETTA RD  
Rochester, NY 14623

PHH Mortgage  
Acct No n/a  
1 Mortgage Way  
Mount Laurel, NJ 08054

Planet Home Lending, LLC.  
Acct No n/a  
321 Research Parkway  
Meriden, CT 06450

PNJ Technology Partners, Inc  
Acct No n/a  
426 New Karner Road  
Albany, NY 12205

Polow & Polow PLLC  
Acct No n/a  
125 Main Street  
Hyde Park, VT 05655

Portfolio Recovery Associates, Inc.  
Acct No n/a  
120 Corporate Boulevard  
Norfolk, VA 23502

Power Play Partners, LLC  
Acct No n/a  
P.O. Box 484  
Clarence Center, NY 14032

Poyner Spruill  
Acct No n/a  
301 S. College Street #2900  
Charlotte, NC 28202

Prenovost, Normandin, Dawe & Rocha  
Acct No n/a  
2122 North Broadway, Suite 200  
Santa Ana, CA 92706

Prestige Financial Services, Inc.  
Acct No n/a  
PO BOX 26707  
Salt Lake City, UT 84126

Primary Residential Mortgage, Inc.  
Acct No n/a  
1480 N 2200 W  
Salt Lake City, UT 84116

Primo Water/Crystal Rock  
Acct No xxxxxxxxxxxx8472  
200 Eagles Landing Blvd,  
Lakeland, FL 33810

Prober & Raphael, A Law Corporation  
Acct No n/a  
20750 Ventura Blvd, Suite 100  
Woodland Hills, CA 91364

Professional Appearances, Inc.  
Acct No UNKN  
407 Essex St  
Millburn, NJ 07041

Progressive Credit Union  
Acct No n/a  
131 West 33rd Street  
New York, NY 10001

ProVest LLC  
Acct No 3257, 3403, 4463  
7702 Woodland Center Blvd - Suite 100  
Tampa, FL 33614

Prozzo Auctions  
Acct No n/a  
RMP Enterprises, Inc,  
207 North Main Street  
Rutland, VT 05701

Publication Elite Company, Inc  
Acct No n/a  
88 Froehlich Farm Blvd - Suite 403  
Woodbury, NY 11797

Pulvers, Pulvers, Thompson & Friedman, LLP  
Acct No n/a  
950 Third Ave, 11th Floor  
New York, NY 10022

Puzzle HR  
Acct No 1636  
4030 West Boy Scout Blvd - suite 325  
Tampa, FL 33607

Quandis, Inc  
Acct No n/a  
30021 Tomas Ste 200,  
Rancho Santa Margarita, CA 92688

RAC title Search, Inc  
Acct No n/a  
Metro Office Park 7 - Street 1 - Suite 2  
Guaynabo, PR 00968

Radharani Properties LLC  
Acct No n/a  
151 Wentworth Avenue  
Albertson, NY 11507

Real Time Resolutions, Inc.  
Acct No n/a  
1349 Empire Central Drive  
Dallas, TX 75247-4029

Reed & Reed Attorneys at Law  
Acct No n/a  
101 E Lumsden Road  
Brandon, FL 33511

Regional Acceptance Corporation  
Acct No n/a  
500 Willowbrook Office Park #575  
Fairport, NY 14450

Relin, Goldstein, & Crane LLP  
Acct No n/a  
28 East Main Street, Suite 1800  
Rochester, NY 14614

Renob, LLC c/o The Falcon Group  
Acct No n/a  
95 Mount Bethel Road  
Warren, NJ 07059

Resnet  
Acct No xx-x0678  
27442 Portola Parkway,  
Foothill Ranch, CA 92610

Resurgent Capital Services  
Acct No n/a  
PO BOX 10587  
15 South Main Street, Suite 401  
Greenville, SC 29601

Reverse Mortgage Solutions, Inc.  
Acct No n/a  
14405 Walters Road  
Houston, TX 77014-1345

Rhinebeck Bank  
Acct No n/a  
2 Jefferson Plaza  
Poughkeepsie, NY 12601

Richard C. Wayne & Associates, P.C.  
Acct No n/a  
24 Lenox Pointe  
Atlanta, GA 30324

Richard Gerbino  
50 Mulberry Lane  
Colts Neck, NJ 07722

Riehlman Shafer & Shaw, LLC  
Acct No n/a  
7693 Route 281  
Tully, NY 13159

RIS Insulation Supply  
Acct No n/a  
1177 Commerce Blvd.  
Midway, FL 32343

Rivermark Community Credit Union  
Acct No n/a  
PO Box 4040  
Beaverton, OR 97006

Robertson, Anschutz & Schneid, PL (RAS)  
Acct No n/a  
6409 Congress Ave, Suite 100  
Boca Raton, FL 33487

Robinowitz Cohlan Dubow & Doherty LLP  
Acct No n/a  
199 Main Street  
White Plains, NY 10601-3171

Rockland Employees Federal Credit Union  
Acct No n/a  
170 East Central Avenue, Rte 59 West  
Spring Valley, NY 10977

Rondout Savings Bank  
Acct No n/a  
ATTN: Sara Morrissey  
Kingston, NY 12401

RoundPoint Mortgage Servicing Corporation  
Acct No n/a  
5016 Parkway Plaza Blvd  
Charlotte, NC 28217

Rushmore Loan Management Services LLC  
Acct No n/a  
15480 Laguna Canyon Road  
Irvine, CA 92618

Rutland County Sheriff  
Acct No n/a  
88 Grove Street  
Rutland, VT 05701

Ryan Hertzel  
25 Amity Pointe Court  
Clifton Park, NY 12065

Ryan Hertzel, Esq.  
Acct No n/a  
25 Amity Point  
Clifton Park, NY 12065

Ryant T. Donovan, Esq.  
Acct No n/a  
Conway, Donovan, & Manley, PLLC  
50 State Street, 2nd Fl.  
Albany, NY 12207

Sagent M&C, LLC  
Acct No xxx0497  
100 Continental Dr - Suite 500,  
King of Prussia, PA 19406

Samantha Batcher  
2020 Westside Ave  
Schenectady, NY 12306

Samuel Kramer, Attorney at Law  
Acct No n/a  
10 Pantigo Road  
East Hampton, NY 11937

Sapirstein and Sapirstein  
Acct No n/a  
1350 Main Street, 12th Floor  
Springfield, MA 01103

Sarah Delane  
Acct No n/a  
8 Spruce Street  
Clifton Park, NY 12065

Saratoga National Bank and Trust Company  
Acct No n/a  
171 South Broadway  
Saratoga Springs, NY 12866

Schaap Moving Systems, Inc  
Acct No Schiller, Knapp LLP  
6 Brown Road  
Albany, NY 12205

Schoharie County Treasurer  
Acct No n/a  
PO Box 9  
Schoharie, NY 12157

School Systems Federal Credit Union  
Acct No n/a  
325 Washington Avenue Extension  
Albany, NY 12205

Secured Equity Financial  
Acct No n/a  
1192 E. Draper Pkwy  
Farmington, NM 87402

SEFCU  
Acct No n/a  
700 Patroon Creek Road  
Albany, NY 12206

Seidman & Pincus, LLC  
Acct No n/a  
777 Terrace Avenue, Suite 508  
Hasbrouck Heights, NJ 07604

Select Portfolio Servicing, Inc.  
Acct No n/a  
3217 S Decker Lake Drive  
Salt Lake City, UT 84119

Selene Finance  
Acct No n/a  
8201 Cypress Plaza Drive  
Jacksonville, FL 32256

Self Reliance Federal Credit Union  
Acct No n/a  
108 Second Avenue  
New York, NY 10003

Seneca Mortgage Servicing, LLC  
Acct No n/a  
611 Jamison Road  
Elma, NY 14059

ServiceLink, LLC  
Acct No 4785  
3220 El Camino Real  
Irvine, CA 92602

ServiceLink, LLC  
Acct No 4785  
P.O. Box 5111327  
Los Angeles, CA 90051-8014

Seterus Inc.  
Acct No n/a  
3039 Cornwallis Road, Building 203 #AA14  
Durham, NC 27709

Severson & Werson  
Acct No n/a  
One Embarcadero Center  
San Francisco, CA 94111

Shannon DeFilippo-Cleland  
339 Saratoga Rd.  
Schenectady, NY 12302

Shapiro, Dicaro & Barak, LLC  
Acct No n/a  
175 Mile Crossing Boulevard  
Rochester, NY 14624

Shapiro, Pendegast & Hasty  
Acct No n/a  
211 Perimeter Center Parkway, NE  
Atlanta, GA 30346

Shelby Mantica  
142 Western Ave  
Cohoes, NY 12047

Shellpoint Mortgage Servicing  
Acct No n/a  
55 Beattie Place, Suite 100  
Greenville, SC 29601

Sheree Stewart  
1506 Huntridge Drive  
Clifton Park, NY 12065

Skopos Financial, LLC  
Acct No n/a  
500 E John Carpenter FWY  
Irving, TX 75062

Small Business Administration  
Acct No UNKN  
Office of General Counsel  
409 Third St., SW  
Washington, DC 20416

SN Servicing Corporation  
Acct No n/a  
323 Fifth Street  
Eureka, CA 95501

Specialized Loan Servicing, LLC  
Acct No n/a  
6200 S. Quebec Street  
Englewood, CO 80111

Spectrum Business  
Acct No 3203  
400 Washington Blvd  
Stamford, CT 06902

Springleaf Finance, Inc.  
Acct No n/a  
601 N.W. Second Street  
Evansville, IN 47708

Sprout Mortgage  
Acct No n/a  
4600 Fuller Drive, Suite 350  
Irving, TX 75038

Statebridge Company, LLC  
Acct No n/a  
6061 S Willow Drive, Suite 300  
Englewood, CO 80111

Stewart Title Guaranty Company  
Acct No n/a  
200 Fifth Avenue, Suite 301  
Waltham, MA 02451

Stewart, Zlimen & Jungers, LTD  
Acct No n/a  
2860 Patton Road  
Saint Paul, MN 55113

STK Janitorial Services, Inc  
Acct No n/a  
126 Stone Quarry Road  
Clifton Park, NY 12065

Stolat Financial LLC  
Acct No n/a  
744 E. Superior Street  
Duluth, MN 55802

STOX Posting & Publishing LLC  
Acct No n/a  
2701 Transit Road - Suite 139  
Elma, NY 14059

STOX Pro Serve  
Acct No n/a  
2701 Transit Road - Suite 140  
Elma, NY 14059

Suffolk County Sheriff  
Acct No n/a  
200 Suffolk Avenue  
Yaphank, NY 11980

Suncoast Schools Federal Credit Union  
Acct No n/a  
Mail Code: COL 002  
Tampa, FL 33680

Sunmark Credit Union  
Acct No n/a  
1187 Troy Schenectady Road  
Latham, NY 12110

Suntrust Mortgage, Inc.  
Acct No n/a  
6225 N Croatan Hwy, Suite D  
Kitty Hawk, NC 27949

TD Auto Finance LLC  
Acct No n/a  
4600 Touchion Road,  
Building 100, Suite 400  
Jacksonville, FL 32245

TD Bank, N.A.  
Acct No n/a  
PO Box 551080  
Jacksonville, FL 32255

Teal Becker & Chiaramonte  
Acct No n/a  
7 Washington Square  
Albany, NY 12205

Teligent IP  
Acct No 1781  
8156 S Wadsworth Blvd - Suite E354  
Littleton, CO 80128-9114

Ten Eyck Group  
Acct No n/a  
1924 Western Avenue  
Albany, NY 12203

The Adirondack Trust Company  
Acct No n/a  
473 Broadway  
Saratoga Springs, NY 12866

The Data Center  
Acct No SLH  
426 New Karner Road  
Albany, NY 12205

The Delaware National Bank of Delhi  
Acct No n/a  
124 Main Street  
Delhi, NY 13753

The Hartford Financial Services Group  
Acct No xxxxxx0001  
One Hartford Plaza  
Hartford, CT 06155

The Hartford Financial Services Group  
Acct No xxxxxx0001  
P.O. Box 783690  
Philadelphia, PA 19178

The Money Source  
Acct No n/a  
3138 East Elwood Street  
Phoenix, AZ 85034

The Murray Law Firm  
Acct No n/a  
10 Maxwell Drive  
Clifton Park, NY 12065

The Newman-Kelton Group, LLC  
Acct No n/a  
11 Sunset Dr  
Latham, NY 12110

The Olsen Law Firm, LLC  
Acct No n/a  
118 Conistor St Suite B290  
Liberty, MO 64068

The Sundmaker Firm  
Acct No n/a  
1027 Ninth Street  
New Orleans, LA 70115

Thomas Pesano  
810 Vermont View Dr.  
Watervliet, NY 12189

Thomas Reed  
Acct No n/a  
111 Hollow Road  
Amsterdam, NY 12010

Thomson Reuters  
Acct No xxxxxxx9000  
610 Opperman Dr,  
Saint Paul, MN 55123-1396

Three Charms, LLC  
Acct No n/a  
PO Box 88  
Waitsfield, VT 05673

TitleMax of Delaware, Inc.  
Acct No n/a  
3401 Kirkwood Hwy  
Wilmington, DE 19808

TitleMax of Ohio, Inc.  
Acct No n/a  
4613 Northfield Road  
Cleveland, OH 44128

TJC Process Service, LTD  
Acct No n/a  
88 Froehlich Farm Blvd - Suite 403  
Woodbury, NY 11797

Tom & Lisa Dougherty  
Acct No n/a  
116 Willow Street  
Guilderland, NY 12084

Toyota Motor Credit Corporation  
Acct No n/a  
19001 South Western Avenue  
Torrance, CA 90509

TrailNorth Federal Credit Union  
Acct No n/a  
1178 NYS RTE 9N  
Ticonderoga, NY 12883

TransAmerica Financial Life Insurance  
Acct No UNKN  
6400 C St. SW  
Cedar Rapids, IA 52499

Triad Financial Services  
Acct No n/a  
13901 Sutton Park Dr. S, Suite 300  
Jacksonville, FL 32224

Tronconi Segarra & Associates LLP  
Acct No xx2424  
8321 Main Street,  
Buffalo, NY 14221

Trott Law  
Acct No n/a  
31440 Northwestern Highway  
Farmington, MI 48334

Troy Sand & Gravel Co., Inc.  
Acct No n/a  
River Street  
Mechanicville, NY 12118

TruNorthern Federal Credit Union  
Acct No n/a  
494 East Main Street  
Malone, NY 12953

Tuthill Finance  
Acct No n/a  
60 Katona Drive, Suite 26  
Fairfield, CT 06824

UFirst Federal Credit Union  
Acct No n/a  
274 Rugar Street  
Plattsburgh, NY 12901

Ulster County  
Acct No n/a  
244 Fair Street  
Kingston, NY 12401-0906

Ulster Savings Bank  
Acct No n/a  
180 Schwenk Drive  
Kingston, NY 12401

University Bank  
Acct No n/a  
29777 Telegraph Rd  
Southfield, MI 48034

USFN  
Acct No n/a  
9001 Airport Freeway - Suite 740  
North Richland Hills, TX 76180

Valerie Cesare  
4 Kyle Drive  
Clifton Park, NY 12065

Valon Mortgage Inc.  
Acct No n/a  
3100 West Ray Road, Suite 201  
Chandler, AZ 85226

Vantage Credit Union  
Acct No n/a  
4020 Fee Fee Road  
Bridgeton, MO 63044

Velocity Commercial Capital, LLC  
Acct No n/a  
30699 Russell Ranch Rd, Suite 295  
Thousand Oaks, CA 91362

Verizon Wireless Bankruptcy Administrati  
Acct No UNKN  
500 Technology Drive, Suite 550  
Saint Charles, MO 63304

Village Clerk for Village of Fort Edward  
Acct No n/a  
161 Ottawa Street  
Lake George, NY 12845

Waitsfield and Champlain Valley Telecom  
Acct No n/a  
3898 Main St  
Waitsfield, VT 05673

Wallkill Valley Federal Savings & Loan  
Acct No n/a  
23 Wallkill Avenue  
Wallkill, NY 12589

Warner Norcross & Judd LLP  
Acct No n/a  
900 Fifth Third Center, 111 Lyon Street  
Grand Rapids, MI 49503-2487

Warren County Sheriff  
Acct No n/a  
413 2nd Street #1  
Belvidere, NJ 07823

Washington County Sheriff  
Acct No n/a  
10 Elm Street  
Montpelier, VT 05602

Washington County Treasurer  
Acct No n/a  
383 Broadway  
Fort Edward, NY 12828

WB Mason Co, Inc.  
Acct No xxxx3821  
59 Centre St  
Brockton, MA 02301

Web Title Agency Corporation  
Acct No n/a  
755 Jefferson Road - Suite 300  
Rochester, NY 14623

Webster Bank, NA.  
Acct No n/a  
200 Executive Blvd SO-245  
Southington, CT 06489

Webster First Federal Credit Union  
Acct No n/a  
271 Greenwood Street  
Worcester, MA 01607

Wells Fargo Auto  
Acct No n/a  
Bankruptcy Department Priority 13  
250 E John Carpenter Fwy  
Irving, TX 75062

Wells Fargo Auto Finance  
Acct No n/a  
435 Ford Road  
Minneapolis, MN 55426

Wells Fargo Bank NA  
Acct No n/a  
7000 Vista Drive  
West Des Moines, IA 50266

Wells Fargo Dealear Services  
Acct No n/a  
Priority 13 MAC# N9305-162  
Minneapolis, MN 55402

Weltman, Weinberg & Reis Co., L.P.A.  
Acct No n/a  
175 S Third St., Suite 900  
Columbus, OH 43215

Whalley Computer Associates, Inc.  
Acct No SKLHL  
1 Whalley Way  
Southwick, MA 01077

William Ambrose, Esq  
Acct No n/a  
181 South Main Street  
Pearl River, NY 10965

William Schiller  
703 Sachem Circle  
Slingerlands, NY 12159

William Schiller, Esq.  
Acct No n/a  
703 Sachem Cir  
Slingerlands, NY 12159

Windham County Sheriff  
Acct No n/a  
185 Old Ferry Road,  
Brattleboro, VT 05301

Yanci Herboldt, Esq.  
Acct No n/a  
460 South Main St, #78 North  
Syracuse, NY 13212

**United States Bankruptcy Court  
Northern District of New York**

In re Schiller, Knapp, Lefkowitz, & Hertzel, LLP

Debtor(s)

Case No.  
Chapter

11

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for Schiller, Knapp, Lefkowitz, & Hertzel, LLP in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

■ None [*Check if applicable*]

**May 30, 2023**

Date

**/s/ Michael Boyle**

**Michael Boyle**

Signature of Attorney or Litigant

Counsel for Schiller, Knapp, Lefkowitz, & Hertzel, LLP

**Boyle Legal LLC**

**64 2nd Street**

**Troy, NY 12180**

**518-687-1648 Fax:518-**

**mike@boylebankruptcy.com**